

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 16 1998 8:00am
Secretary of State

DOCUMENT # **G46037** (9)
1. Corporation Name
INTERNATIONAL FINANCE BANK



Principal Place of Business Mailing Address
MAIN OFFICE **MAIN OFFICE**
1432 BRICKELL AVENUE **1432 BRICKELL AVENUE**
MIAMI FL 33131 **MIAMI FL 33131**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/23/1983	
21 Suite, Apt. #, etc.		26 P.O. Box 441900		4. FEI Number 59-2327185	
22 City & State		27 Suite, Apt. #, etc.		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
23 Zip		28 MIAMI, FLORIDA		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
24 Country		29 33144		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	
25		30 MIAMI-DADE		10. Name and Address of New Registered Agent	
9. Name and Address of Current Registered Agent				81 Name	
RUDD, MARIA				82 Street Address (P.O. Box Number is Not Acceptable)	
1432 BRICKELL AVENUE				83	
MIAMI FL 33131				84 City	
				85 Zip Code	

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CEO	1.1 TITLE	VP
NAME	AQUIRRE, JAVIER	1.2 NAME	GRANJA, SANTIAGO
STREET ADDRESS	44 E 67 ST	1.3 STREET ADDRESS	206 NE 2nd AVENUE
CITY-ST-ZIP	NEW YORK NY 10021	1.4 CITY-ST-ZIP	DANIA, FL 33004
TITLE	COO	2.1 TITLE	
NAME	GOMEZ, RUBEN D	2.2 NAME	
STREET ADDRESS	888 BRICKELL KEY DRIVE, APT. 907	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33131	2.4 CITY-ST-ZIP	
TITLE	EVP	3.1 TITLE	
NAME	BRITTI, ELISEO	3.2 NAME	
STREET ADDRESS	7045 S.W. 107TH TERRACE	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33156	3.4 CITY-ST-ZIP	
TITLE	VP	4.1 TITLE	
NAME	HARDUVEL, T. GEORGE	4.2 NAME	
STREET ADDRESS	8980 S.W. 56TH TERRACE	4.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33173	4.4 CITY-ST-ZIP	
TITLE	VPT	5.1 TITLE	
NAME	CALLAZO, MANUEL E JR.	5.2 NAME	
STREET ADDRESS	8533 S.W. 5TH STREET, #205	5.3 STREET ADDRESS	
CITY-ST-ZIP	PEMBROKE PINES FL 33025	5.4 CITY-ST-ZIP	
TITLE	VP	6.1 TITLE	
NAME	HERNANDEZ, DARIO	6.2 NAME	
STREET ADDRESS	1910 S.W. 125TH COURT	6.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33173	6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

[Signature]

J. J. P. 1544 (30) 1.17.92/1

CR2E034 (5/98)