# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**
**May 17, 2001 8:00 am**
**Secretary of State**
05-17-2001 91307 032 ***558.75

0154816

DOCUMENT # G46037

1. Entity Name

INTERNATIONAL FINANCE BANK

657969

DO NOT WRITE IN THIS SPACE

| Principal Place of Business | Mailing Address |
|---|---|
| 888 BRICKELL AVENUE<br>MIAMI FL 33131-2913 | 888 BRICKELL AVENUE<br>MIAMI FL 33131-2913 |

| 2. Principal Place of Business | | 3. Mailing Address | |
|---|---|---|---|
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State | | City & State | |
| Zip | Country | Zip | Country |

4. FEI Number 59-2327185 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

| 6. Name and Address of Current Registered Agent | 7. Name and Address of New Registered Agent |
|---|---|
| VAZQUEZ, FELIX A<br>888 BRICKELL AVENUE<br>MIAMI FL 33131 | Name: GONZALEZ, CHRISTINE M.<br>Street Address (P.O. Box Number is Not Acceptable): 888 BRICKELL AVENUE<br>City: MIAMI **FL** Zip Code: 33131 |

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE Christine Gonzalez CHRISTINE M. GONZALEZ 5/7/01
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS $150.00**
**After MAY 1, 2001 Fee will be $550.00**
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

| 11. OFFICERS AND DIRECTORS | | | 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | | |
|---|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | SVCO<br>GRANJA, SANTIAGO<br>206 NE 2ND AVENUE<br>DANIA FL 33004 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | EVP<br>MANZANARES, JAVIER<br>1229 SOROLLA AVENUE<br>CORAL GABLES FL 33134 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | EVP<br>ALVARADO, NELSON<br>9215 SW 71 AVE.<br>MIAMI FL 33156 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | VPF<br>VAZQUEZ, FELIX<br>325 OCEAN DRIVE #605<br>MIAMI BEACH FL 33139 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | SVPFC<br>GONZALEZ, CHRISTINE M.<br>7695 S.W. 143 STREET<br>MIAMI, FL 33158 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | SVCT<br>CALLAZO, MANUEL E JR.<br>8533 S.W. 5TH STREET, #205<br>PEMBROKE PINES FL 33025 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | PCED<br>ALVARADO, NELSON<br>9215 S.W. 71 AVENUE<br>MIAMI FL 33156 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |

CR2E034 (10/00)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** SANTIAGO GRANJA 5.7.2001 305.648.8835
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #