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FILED

Jan 23 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # **G68138** (8)

1. Corporation Name
INTERMEX, INC.



Principal Place of Business

~~8175 N.W. 12TH STREET~~
~~SUITE 137~~
MIAMI FL 33126

Mailing Address

~~8175 N.W. 12TH STREET~~
~~SUITE 137~~
MIAMI FL 33126-1828

2. Principal Place of Business

21 **1452 NW 78 AVE**

Suite, Apt. #, etc.

22 City & State
MIA FL

23 Zip **33126** Country **USA**

2a. Mailing Address

26 **1452 NW 78 AVE**

Suite, Apt. #, etc.

27 City & State
MIA FL

28 Zip **33126** Country **USA**

3. Date Incorporated or Qualified
11/07/1983

3a. Date of Last Report
03/05/1996

4. FEI Number

59-2413571

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution



**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes



Yes



No

9. Name and Address of Current Registered Agent

PEREIRA-IGNACIO DIANA

~~8175 NW 12 ST #137~~ **1452 N.W. 78 AVE.**
MIAMI FL 33126

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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

TITLE **PTD** ☐ DELETE
NAME **PEREIRA-IGNACIO, DIANA**
STREET ADDRESS ~~8175 NW 12 ST. #137~~ **1452 NW 78 AVE**
CITY- ST- ZIP **MIAMI FL**

TITLE **VSD** ☐ DELETE
NAME **DECASTRO, NEIDA**
STREET ADDRESS ~~8175 NW 12 ST. #137~~ **1452 NW 78 AVE**
CITY- ST- ZIP **MIAMI FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE **PRES.** ☐ Change ☐ Addition
12 NAME **PEREIRA-IGNACIO**
13 STREET ADDRESS **1452 NW 78 AVE**
14 CITY- ST- ZIP **MIA FL 33126**

21 TITLE **V.P.** ☐ Change ☐ Addition
22 NAME **DECASTRO, NEIDA**
23 STREET ADDRESS **1452 N.W. 78 AVE**
24 CITY- ST- ZIP **MIAMI FL 33126**

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY- ST- ZIP

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY- ST- ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY- ST- ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY- ST- ZIP

14. I do 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 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, unchanged, or on an attachment with an address.

SIGNATURE:

Diana P. Ignacio
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/15/97

(705) 5930028

Date

Daytime Phone

CR2E034 (9/96)