FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT
1996

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

DOCUMENT # K61263 (5)

1. Corporation Name

IBC INTERNATIONAL S.A. CORPORATION

Principal Place of Business	Mailing Address
100 S E SECOND ST 2315-A MIAMI FL 33131 US	2 SOUTH BISCAYNE BLVD 113729 MIAMI FL 33111 US

3. Date Incorporated or Qualified: 01/26/1989
3a. Date of Last Report: 05/01/1995

2. Principal Place of Business — 21 / Suite, Apt. #, etc. — 22 / City & State — 23 / Zip — 24 / Country — 25
2a. Mailing Address — 26 / Suite, Apt. #, etc. — 27 / City & State — 28 / Zip — 29 / Country — 30

4. FEI Number: 65-0095539 ☐ 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

IBC FIDUCIARY INC.
100 SE 2ND ST.
SUITE 2315-A
MIAMI FL 33131

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 ____ DATE ____

12. OFFICERS AND DIRECTORS

TITLE	AS	☐ DELETE
NAME	SMEJDA, LUCIUS	
STREET ADDRESS	444 BRICKELL AVE #51-246	
CITY-ST-ZIP	MIAMI FL	
TITLE	DS	☐ DELETE
NAME	HENLEY, J.	
STREET ADDRESS	444 BRICKELL AVE #51-246	
CITY-ST-ZIP	MIAMI FL	
TITLE	DPVT	☐ DELETE
NAME	HENNING, U.	
STREET ADDRESS	444 BRICKELL AVE #51-246	
CITY-ST-ZIP	MIAMI FL	
TITLE	VP	☒ DELETE
NAME	CORBETT, A.	
STREET ADDRESS	444 BRICKELL AVE. #51-246	
CITY-ST-ZIP	MIAMI FL	
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

1.1 TITLE	VAS	☒ Change ☐ Addition
1.2 NAME	SMEJDA, L.	
1.3 STREET ADDRESS	444 Brickell Ave #51-246	
1.4 CITY-ST-ZIP	Miami FL 33131	
2.1 TITLE	DS	☒ Change ☐ Addition
2.2 NAME	HENLEY, J.	
2.3 STREET ADDRESS	444 Brickell Ave #51-246	
2.4 CITY-ST-ZIP	Miami FL 33131	
3.1 TITLE	VT	☒ Change ☐ Addition
3.2 NAME	HENNING, U.	
3.3 STREET ADDRESS	444 Brickell Ave #51-246	
3.4 CITY-ST-ZIP	Miami FL 33131	
4.1 TITLE	AS	☐ Change ☒ Addition
4.2 NAME	CARBAYO, E.	
4.3 STREET ADDRESS	444 Brickell Ave #51-246	
4.4 CITY-ST-ZIP	Miami FL 33131	
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: J. Henley
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)