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Mar 24 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 # K86619 (9)

1. Corporation Name:
INTERNATIONAL ENTERPRISES GROUP, INC.



Principal Place of Business Mailing Address
P.O. BOX 522900 P.O. BOX 522900
MIAMI FL 33152 MIAMI FL 33152-2900

3. Date Incorporated or Qualified 05/09/1989 3a. Date of Last Report 02/26/1996

2. Jeffrey C. Roth, Esq, c/o Roth & Scholl 1500 San Remo Ave., #176 Coral Gables, FL 33146 USA	2a. Jeffrey C. Roth c/o Roth & Scholl 1500 San Remo Ave., #176 Coral Gables, FL 33146 USA	4. FEI Number 65-0117574	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

ROTH, LEONARDO
9330 S DIXIE HWY PH 2
MIAMI FL 33156

10. Name and Address of New Registered Agent

81 Name	Jeffrey C. Roth
82 Street Address (P.O. Box Number is Not Acceptable)	Roth & Scholl
83	1500 San Remo Avenue, Suite 176
84 City	Coral Gables
85 FL	33146

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 provisions of Section 607.0505, Florida Statutes.

SIGNATURE: *Jeffrey C. Roth* JEFFREY C. ROTH DATE: 2/20/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TVD	1.1 TITLE	C
NAME	REY, ALFONSO	1.2 NAME	Rey, Alfonso
STREET ADDRESS	2481 NW 88 AVE BLDG 702	1.3 STREET ADDRESS	9100 S. Dadeland Blvd., # 402
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	Miami, FL 33156
TITLE		2.1 TITLE	P/S/T
NAME		2.2 NAME	Romeo, Paula
STREET ADDRESS		2.3 STREET ADDRESS	9100 S. Dadeland Blvd., #402
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Miami, FL 33156
TITLE		3.1 TITLE	V
NAME		3.2 NAME	Cindy Schumacher
STREET ADDRESS		3.3 STREET ADDRESS	9100 S. Dadeland Boulevard, #402
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Miami, FL 33156
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 if changed, or on an attachment with an address

SIGNATURE: *Paul J. Gomez* 2/27/97 (305) 670-7783

CR2E034 (9/96)