FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # K96235

(2)

INTERAMERICAN FINANCIAL SERVICES, INC.

Principal Place of Business
% HECTOR HERNANDEZ
11890 TAMIAMI TRAIL STE. 303
SHASH EL 99104

Mailing Address

% HECTOR HERNANDEZ

FILED Apr 17 1997 8:00am Secretary of State



11890 TAMIAMI TRAIL STE. 303 MIAMI FL 33184		11890 TAMIAMI TRAIL STE. 303 MIAMI FL 33184-1727							
		· .			06/19/1989 06/19/		of Last F 3/1996	of Last Report /1996	
2. Principal P	lace of Business	2a. Mailing Address	21	STORE-	4. FEI Number		J	pplied For	
	O N.W. 26 STREET	26 10520 N.W.	26	DIKEET	65-0124990			ot Applicable	
Suite, Apt. 2 C - 1 (01	Suite, Apt. #, etc. 27			5. Certificate of Status Desired			Additional lequired	
City & State 3 MIA	3 - 1	City & State 28 MIAMI, FI	33	172	Election Campaign Financing Trust Fund Contribution			May Be to Fees	
Zip 4] 33 l T		29 33172 30	D A			Yes 🗍	No	s. 199.032,	
	9. Name and Address of Current	Registered Agent	81		10. Name and Address of New Re	gistered Ag	ent		
HERNANDEZ, HECTOR 11890 TAMIAMI TRAIL				Street Addr	ERNANDEZ, HECTO	OR			
SUITE 303			-	10	520 N.W. 26 Th	57			
MIA	MI FL 33184		83	C.	-101				
			84	City M	lAmi	FL	85 Zip	Code 72	
11. Pursuant	to the prevision of Sections 607.0502	and 607.1508, Elerida Statutes, the	e above	e-named corp	poration submits this statement for the p	ourpose of c	hanging	its registered	
office or r agent. La	registered agent, or both, in the State am familiar with, and ecept the obliga	of Florida. Such change was author tions of, Section 60, 0805, Florida (rized by Statutes	the corporat s.	poration submits this statement for the place ion's board of directors. I hereby accept	ot the appoi	ntment as	registered	
SIGNATURE (uy)			<u>σ</u>	7 - 7 1	'		
·	Signar Ve, typed or printed name of vigistered ager			int signature requir	ed when reinstating)	DATE	U-0-0-0		
2.	OFFICERS AND		I 3.		ADDITIONS/CHANGES TO OFFIC		Change	HS IN 12 Addition	
	HERNANDEZ, HECTOR	/	I.2 NAME	}		l.a	T CHARGE	L. Additio	
JAME STREET ACIDRESS	9331 SW 76 STREET	1		ADDRESS					
OTY+ST-7IP	MIAMI FL		1.4 CHTY - S	Y					
111-51-21F	SO		1.4 CHT-S	11-211		[Change	Additio	
IAM E	HERNANDEZ, ALEIDO		2.2 NAME			-			
STREET ADDRESS	57 NW 76 CT	4		ADDRESS					
CHTY - ST - ZIP	MIAMI FL	· · · · · · · · · · · · · · · · · · ·	2. 4 CITY-	ì					
TITLE.			3.1 TITLE				Change	Addition	
NAME		3	3.2 NAME						
STREET ADDRESS	ļ	3	3.3 STREET	ADDRESS					
DITY-ST-ZIP			3 4. CITY -	ST-ZIP					
IIILE		DELETE 4	I.1 TITLE			Ľ	Change	Additio	
NAME)	4	1. 2 NAME						
STREET ADORESS	1	4	4.3 STREET	ADDRESS					
CITY-S1-ZIP			1.4 CITY - S	ST-ZIP					
NTLE		DELETE 5	5.1 TITLE			Τ	Change	Addition	
)	5	5.2 NAME)					
NAME				1					
		i s	5.3 STREET	ADDRESS					
STREET ADDRESS		5	54 CITY-S	1					
STREET ADDRESS CITY - ST - ZIP		5		1	the state of the s	L	Change	Additio	
NAME STREET ADDRESS CITY - ST- ZIP TITLE NAME		DELETÉ É	54 CITY-S	1	······································	L	Change	Addition	
STREET ADDRESS CITY - S1 - ZIP TITLE		DELETE 6	5 4 CITY-S 5 1 TITLE 5 2 NAME	1	Water the same of	L	Change	Addition	

I do nereby certify that the information supplied with this tiling does not quality 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 is changed, or on an attachment with an address.

ALEIDO HERNANDEZ