FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

APPROVED AND FILED
95 MAY -1 AM 8:22
SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # **L05973** **(7)**

1. Corporation Name
INTERAMERICAN STATE REALTY, INC.

Principal Place of Business:
600 N THAKER AVE
A-22 BOX 19004
KISSIMMEE FL 34741
US

Mailing Address:
414 POINCIANA CIR
STE 414
KISSIMMEE FL 34744
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **08/02/1989**
3a. Date of Last Report: **05/01/1994**
4. FEI Number: **59-2988620** — 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

2. Principal Place of Business
21: 600 N THACKER AV
22 (Suite, Apt. #, etc.): A-22
23 (City & State): KISSIMMEE, FL
24 (Zip): 34741
25 (Country):

2a. Mailing Address
26:
27 (Suite, Apt. #, etc.):
28 (City & State):
29 (Zip):
30 (Country):

9. Name and Address of Current Registered Agent

SANTIAGO, ANGEL
7130 S. ORANGE BLOSSOM TRAIL
SUITE 110 A
ORLANDO FL 32809

10. Name and Address of New Registered Agent

81 Name: ANGEL SANTIAGO
82 Street Address (P.O. Box Number is Not Acceptable)
83: 414 POINCIANA CIR
84 City: KISSIMMEE **FL** 85 Zip Code: 34744

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

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	SANTIAGO, ANGEL
STREET ADDRESS	7130 S. ORANGE BLSM TR.
CITY-ST-ZIP	ORLANDO FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DIRECTOR	☐ Change ☐ Addition
1.2 NAME	ANGEL SANTIAGO	
1.3 STREET ADDRESS	414 POINCIANA CIR.	
1.4 CITY-ST-ZIP	KISSIMMEE, FL 34744	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
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)(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: Angel Santiago — 4-27-95 — (407) 847-8886
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0482437 FP