

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
 AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT 1996



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

**FILED**  
**Aug 05, 1996 08:00 AM**  
 Secretary of State

DOCUMENT # **L19856** (8)  
 1. Corporation Name  
**INTERNATIONAL INVESTMENT SECURITIES CORPORATION**



Principal Place of Business Mailing Address  
**C/O JONATHAN H. WARNER**  
**100 S. E. 2ND ST., 17TH FLOOR**  
**MIAMI FL 33133**  
**US**

2. Principal Place of Business 2a. Mailing Address  
**21 100 S.E. 2nd Street** **26 100 S.E. 2nd Street**  
 Suite, Apt. #, etc. Suite, Apt. #, etc.  
**22 17th Floor/RDS** **27 17th Floor/RDS**  
 City & State City & State  
**23 Miami, FL** **28 Miami, FL**  
 Zip Country Zip Country  
**24 33131** **25 USA** **29 33131** **30 USA**

3. Date Incorporated or Qualified **09/29/1989** 3a. Date of Last Report **04/14/1995**  
 4. FEI Number **65-0154884** 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  
**WARNER, JONATHAN H.**  
**100 SE 2ND ST**  
**17TH FLOOR**  
**MIAMI FL 33131**

10. Name and Address of New Registered Agent  
**81 Name Ronald D. Shindler**  
**82 Street Address (P.O. Box Number is Not Acceptable) 100 S.E. 2nd Street**  
**83 17th Floor**  
**84 City Miami** **85 FL** Zip Code **33131**

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 Ronald D. Shindler DATE 7/17/96  
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when item 10 changed)

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	BAUER, FEDERICO	
STREET ADDRESS	9 NIVEL TORRE I	
CITY-ST-ZIP	GUATEMALA CTY, GUATEM	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	PEREZ, MANUEL A	
STREET ADDRESS	9 NIVEL TORRE I	
CITY-ST-ZIP	GUATEMALA CTY, GUATEM	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	SERRA, JUAN JOSE	
STREET ADDRESS	9 NIVEL TORRE I	
CITY-ST-ZIP	GUATEMALA CTY, GUATEM	
TITLE	V	<input type="checkbox"/> DELETE
NAME	PAZ, JOSE GUILLERMO	
STREET ADDRESS	9 NIVEL TORRE I	
CITY-ST-ZIP	GUATEMALA CTY, GUATEM	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME		
13 STREET ADDRESS		
14 CITY-ST-ZIP		
21 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		
31 TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
32 NAME	SCHLESINGER, LUIS E. RODRIGUEZ	
33 STREET ADDRESS	9 NIVEL TORRE I	
34 CITY-ST-ZIP	GUATEMALA CITY, GUATEMALA	
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jose Guillermo Paz DATE: June 10, 1996  
Signature typed or printed name of signing officer or director Daytime Phone #  
**JOSE GUILLERMO PAZ, Vice President**

CR2E034 (3/96)