FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

| 1990 |
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| |

DOCUMENT # M53321

(9)

| INTERI | NATIONAL REALTY HOLDIN | IG CORP. | | | | | | |
|---|---|--|---|--------------------|---------------|---|--------------------------|-------------|
| Principal Place of C/O LEIDA (2121 S.W. 3 MIAMI FL 33 US | LLERENA RD AVE., 4TH FLOOR | | C/O LEIDA LLERENA 2121 3RD AVE 4TH FLOOR MIAMI FL 33129 | | | 3. Date Incorporated or Qualified 3a. Date of Last Report 06/05/1987 06/14/1995 | | |
| 2. Principal Plac | re of Business | 2a. Mailing Address | ta. Mailing Address | | | 4. FEI Number Applied For | | |
| 21 | or or other many | 26 | 1 | | | 59-2813566 Not Applicable | | |
| Suite, Apt. #, etc. | | Suite Apt. #, etc | Suite Apt. #, etc | | | 5. Certificate of Status Desired | sa.75 Additional | |
| 22 | | 27 | | | | | Fee Required | |
| City & State | | City & State | | | | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 May B | |
| 23 | | 28! | | | | Trust Fund Contribution 8. This corporation has liability for intangible | Added to Fee: | |
| Zφ | Country Zip 25 29 3 | | 30 | ~_ · | | Florida Statutes Yes No | | " |
| 24 | 9. Name and Address of Current | | 1301 | | | 10. Name and Address of New Register | | $\neg \neg$ |
| | | | | 81 | Name | | | |
| HEDEN | ia, leida | | | 82 | Ctroot Add | ress (P.O. Box Number is Not Acceptable) | | |
| | W 3RD AVENUE | | 1 | • | Street Addi | ress (.c. tox Hermer is Not Acceptance, | | |
| 4TH FL | | | [| #3 | | | | |
| | FL 33129 | | } | 84 | City | | . 85 Zip Code | |
| | | | | | • | _ | L ' | |
| or registere familiar with | the provisions of Sections services of Section diagent, or both, in the State of Floral n, and accept the obligations of Section system tipe operation and other the dates a | a. Such change was authoriz on 607.0505. Florida Statutes | ed by the c | :Grpc | oration's boa | ration submits this statement for the purpose of and of directors. Thereby accept the appointmen | t as registered agent. 1 | am |
| 12. | | | 13. | | | ADDITIONS/CHANGES TO OFFICERS | AND DIRECTORS IN 1: | 2 |
| TITLE | VD | DELFTE [| 1 1 7: | T _k E | | | ☐ Change ☐ Ad | d-tion |
| NAME | VALDES, ALBERT | | 1.2 NA | LY/E | | | | |
| STREET ADDRESS | 2121 S.W. THIRD AVENUE | | 13.81 | F# ET | ADDRESS | | | |
| CITY-ST-ZIP | MIAMI FL | | 14 CI | 7 r - S | r. ZiP | A | | |
| TITLE | SD | ☐ DELETE | 2 1 1 | TI.E | | | ☐ Change ☐ Ad | ddion |
| NAME | ROSSEL, GUILLERMO | • | | 2.2 NAME | | | | , |
| STREET ADDRESS | 2121 S.W. THIRD AVENUE | | 2 3 S ⁷ | 2.3 STREET ADDRESS | | | | |
| C+TY - S1 - Z+P | MIAMI FL | - Dritt | 2401 | | 1-216 | | Change Ad | Iditac |
| TITLE | D | ☐ DELETE | 3 1 1 | | | | | 011131 |
| NAME | FERNANDEZ, JOSE R. | | 32 N/ | | | | | |
| STREET ADDRESS | 2121 S.W. THIRD AVENUE | | | | LADDRESS | | | |
| CITY - ST - 7IP | MIAMI FL TD | [] DELETE | 3 4 Cı | | 11 - ZIF | | ☐ Change ☐ Ad | dition |
| NAME | PRESTAMO, ALBA | | 42 N | | | | | |
| STREET ADDRESS | 2121 SW THIRD AVENUE | | | | ADDRESS | | | |
| CITY - ST - ZIP | MIAMI FL | | | | ir - 71P | | | |
| TIFLE | PD | □ DELETE | 5.17 | | | | Change Ad | dition |
| NAME | SOLER, FRANCISCO A | | 5.2 No | AME | | | | |
| STREET ADDRESS | 2121 SW THIRD AVE | | 5.3 S | TREET | ADDRESS | | | |
| CITY - S.I - ZIP | MIAMI FL | | 5.4 CI | lly - S | 31 - 71F | | | |
| TITLE | | ☐ DELETE | 6.11 | ·ILE | | | Change 🔲 Ad | Idition |
| NAME | | | 62 N | AME | | | | |
| STREET ADORESS | | | 638 | THEE I | ADDRESS | | | |
| CITY-ST-ZIP | A Standard Company | its the flow he we had see for | | | ST ZIP | for the exemution stated in Section 119.07(3)/k | Florida Statutes I fur | ther |
| | | | | | | | | |

I do hereby certify that the information suppried 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 convoration 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 for an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Copton Physic •