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CORPORATION ANNUAL REPORT

1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 30 AM 10:53

DOCUMENT # **M92392** **(3)**

1. Corporation Name

INTERNATIONAL INSURINVEST, INC.

Principal Place of Business	Mailing Address
C/O ALBERTO VALDES 2121 S.W. 3RD AVE. MIAMI FL 33129	C/O ALBERTO VALDES 2121 S.W. 3RD AVE MIAMI FL 33139 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 07/29/1988
3a. Date of Last Report: 12/08/1994

2. Principal Place of Business (21)
2a. Mailing Address (26)
4. FEI Number: 65-0088006 ☐ Applied For ☐ Not Applicable

Suite, Apt. #, etc. (22) / Suite, Apt. #, etc. (27)
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

City & State (23) / City & State (28)
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

Zip (24) Country (25) / Zip (29) Country (30)
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

LLERENA, LEIDA
2121 SW 3RD AVE
MIAMI FL 33129

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE		☐ Change ☐ Addition
NAME	VALDES, ALBERTO	12 NAME		
STREET ADDRESS	2121 SW 3RD AVE	13 STREET ADDRESS		
CITY ST ZIP	MIAMI FL	14 CITY ST ZIP		
TITLE	VD	21 TITLE		☑ Change ☐ Addition
NAME	HALL, RON	22 NAME	DELETE	
STREET ADDRESS	2121 SW 3RD AVE	23 STREET ADDRESS		
CITY ST ZIP	MIAMI FL	24 CITY ST ZIP		
TITLE	TD	31 TITLE	TD	☑ Change ☐ Addition
NAME	PRESTANO, ALBA	32 NAME	PRESTANO, ALBA	
STREET ADDRESS	2121 SW 3RD AVE	33 STREET ADDRESS	2121 SW 3RD AVE	
CITY ST ZIP	MIAMI FL	34 CITY ST ZIP	MIAMI, FL	
TITLE	SD	41 TITLE		☐ Change ☐ Addition
NAME	ROSSEL, GUILLERMO	42 NAME		
STREET ADDRESS	2121 SW 3RD AVE	43 STREET ADDRESS		
CITY ST ZIP	MIAMI FL	44 CITY ST ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY ST ZIP		54 CITY ST ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY ST ZIP		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)(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: _____ 3/30/95 (305) 220 7300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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CONTINUATION

13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	D	☐ Change ☑ Addition
1.2 NAME	BARRY G. CRAIG	
1.3 STREET ADDRESS	2121 SW 3RD AVE 5TH FL	
1.4 CITY-ST-ZIP	MIAMI, FL. 33129	
1.1 TITLE	D	☐ Change ☑ Addition
1.2 NAME	STEPHEN L. HERBERT	
1.3 STREET ADDRESS	2121 SW 3RD AVE 5TH FL	
1.4 CITY-ST-ZIP	MIAMI, FL. 33129	
1.1 TITLE	D	☐ Change ☑ Addition
1.2 NAME	RICHARD J LAMPEN	
1.3 STREET ADDRESS	2121 SW 3RD AVE 5TH FL	
1.4 CITY-ST-ZIP	MIAMI, FL 33129	
1.1 TITLE	D	☐ Change ☑ Addition
1.2 NAME	ADOLFO SALUME A	
1.3 STREET ADDRESS	2121 SW 3RD AVE 5TH FL	
1.4 CITY-ST-ZIP	MIAMI, FL 33129	
1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		