

FILE NOW: FILING FEE IS \$61.25

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May 01 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N33370** (0)  
1. Corporation Name

**INTERNATIONAL FRONTENNIS ASSOCIATION, CORP.**

Principal Place of Business <del>8510 NW 70 ST</del> <del>MIAMI FL 33148</del> <del>US</del>	Mailing Address <b>9400 SW 77 ST</b> <b>MIAMI FL 33173</b> <b>US</b>
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2. Principal Place of Business 21 <b>8442 N.W. 72 Street</b> Suite, Apt. #, etc. 22 City & State 23 <b>Miami, Florida</b> Zip 24 <b>33166</b> Country 25 <b>USA</b>	2a. Mailing Address 26 <b>8105 S.W. 74 St.</b> Suite, Apt. #, etc. 27 City & State 28 <b>Miami, Florida</b> Zip 29 <b>33143</b> Country 30 <b>USA</b>
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9. Name and Address of Current Registered Agent <b>MARTINEZ, FERNANDO E.</b> <del>9400 SW 77 STREET</del> <del>MIAMI FL 33173</del>	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) <b>8105 S.W. 74 Street</b> 83 84 City <b>Miami</b> FL 85 Zip Code <b>33143</b>
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.  
SIGNATURE *Fernando E. Martinez* **Fernando E. Martinez** V.P. **4/20/98**  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <b>MORALES, SILVIO R.</b> <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>11880 SW 46 ST</b>	1.2 NAME	
STREET ADDRESS	<b>MIAMI FL</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	TD <b>CASTRO, HUGO A.</b> <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>2100 W 76 ST</b>	2.2 NAME	
STREET ADDRESS	<b>MIAMI FL</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	VD <b>MARTINEZ, FERNANDO E.</b> <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>9400 SW 77 STREET</b>	3.2 NAME	
STREET ADDRESS	<b>MIAMI FL 33173</b>	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Fernando E. Martinez* **Fernando E. Martinez** **4/20/98** (305) 592-636  
Signature, typed or printed name of registered agent and title if applicable Date

CR2E037 (10/97)