2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 04, 2000 8:00 am
Secretary of State
05-04-2000 90031 035 ****61.25

DOCUMENT # N49697

1. Entity Name

ASOCIACION INTERAMERICANA DE CONTABILIDAD, INC.

Principal Place of Business	Mailing Address
275 FOUNTAINBLEAU BLVD SUITE 245 MIAMI FL 33172	275 FOUNTAINBLEAU BLVD SUITE 245 MIAMI FL 33172-4576

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0329274 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ABREU, VICTOR 9910 W CALUSA DR MIAMI FL 33186	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

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

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees	Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP ZAMORANO, ENRIQUE 9910 WEST CALUSA CLUB DRIVE MIAMI FL 33186 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP Nasi, Antonio Carlos 9910 W. Calusa Club Dr. Miami - FL 33186. ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV CARLOS, ANTONIO 9910 WEST CALUSA CLUB DRIVE MIAMI FL 33186 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV Hernández, Jaime A. 9910 W. Calusa Club Dr Miami, FL. 33186 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BRAVO, MARIA I 9910 WEST CALUSA CLUB DRIVE MIAMI FL 33186 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Sotomayor, Ivan 9910 W. Calusa Club Dr. Miami - FL. 33186 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LIZARDO, AGUSTIN 9910 WEST CALUSA CLUB DRIVE MIAMI FL 33186 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Paillant, Joseph 9910 W. Calusa Club Dr. Miami - FL. 33186 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SOTOMAYOR, IVAN 9910 WEST CALUSA CLUB DRIVE MIAMI FL 33186 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Castilla, Antonio 9910 W. Calusa Club Dr. Miami - FL. 33186 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TOMATI, CARLOS 9910 WEST CALUSA CLUB DRIVE MIAMI FL 33186 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Castañeda, Rudy 9910 W. Calusa Club Dr. Miami - FL. 33186. ☐ Change ☒ Addition

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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an asterisk, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED Victor Abreu Exec. Director. 01/24/'00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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Page 2
N49697
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ASOCIACION INTERAMERICANA DE CONTABILIDAD, INC.

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275 FONTAINEBLEAU BLVD SUITE 245 MIAMI FL 33172	275 FONTAINEBLEAU BLVD SUITE 245 MIAMI FL 33172-4576

[redacted]

DO NOT WRITE IN THIS SPACE

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Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number: 65-0329274 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ABREU VICTOR
9910 W CALUSA DR
MIAMI FL 33186

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida

SIGNATURE _____ DATE

Signature required of registered agent and date if reinstated. NOTE: Registered Agent signature required when reinstating.

FILE NOW: FEE $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

Please Make Check Payable to: Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Vargas Calderón, Victor 9910 W. Calusa Club Dr. Miami FL 33186.	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT Abreu Páez, Victor 9910 W. Calusa Club Dr Miami, FL 33186.	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E037 (6/99)

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an entry with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED

Signature and Printed Name of Officer, Director, or Agent Date Daytime Phone #