

FILED
Jan 24, 2005 8:00 am
Secretary of State

01-24-2005 90035 003 ****70.00

40004000



01182005 Chg-NP CR2E037 (10/03)

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

5. Certificate of Status Desired **\$8.75** Additional Fee Required

DOCUMENT # N49697
 1. Entity Name
ASOCIACION INTERAMERICANA DE CONTABILIDAD, INC.



Principal Place of Business
**275 FOUNTAINBLEAU BLVD
 SUITE 245
 MIAMI, FL 33172**

Mailing Address
**275 FOUNTAINBLEAU BLVD
 SUITE 245
 MIAMI, FL 33172**

2. Principal Place of Business Suite, Apt. #, etc.
 3. Mailing Address Suite, Apt. #, etc.

City & State

Zip Country Zip Country

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. I am familiar with, and accept the obligations of registered agent.

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

**Filing Fee is \$61.25
 Due by May 1, 2005**

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

**Make check payable to
 Florida Department of State**

10. OFFICERS AND DIRECTORS	
TITLE VPPT Delete <input type="checkbox"/>	NAME PORRAS, CORNELJO J STREET ADDRESS 9910 WEST CALUSA CLUB DRIVE CITY-ST-ZIP MIAMI, FL 33186
TITLE VPFD Delete <input type="checkbox"/>	NAME BARNES, PIERRE STREET ADDRESS 9910 WEST CALUSA CLUB DRIVE CITY-ST-ZIP MIAMI, FL 33186
TITLE VPD Delete <input type="checkbox"/>	NAME RODRIGUEZ, LEONARD STREET ADDRESS 9910 WEST CALUSA CLUB DRIVE CITY-ST-ZIP MIAMI, FL 33186
TITLE PCEO Delete <input type="checkbox"/>	NAME ABREU, VICTOR STREET ADDRESS 9910 WEST CALUSA CLUB DRIVE CITY-ST-ZIP MIAMI, FL 33186
TITLE VPC Delete <input type="checkbox"/>	NAME SANDOVAL, JORGE STREET ADDRESS 9910 WEST CALUSA CLUB DRIVE CITY-ST-ZIP MIAMI, FL 33186
TITLE VPFD Delete <input type="checkbox"/>	NAME SALGADO, GLADYS I STREET ADDRESS 9910 WEST CALUSA CLUB DRIVE CITY-ST-ZIP MIAMI, FL 33186

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE President / Chairman Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>	NAME Leonardo Rodriguez STREET ADDRESS 9910 West Calusa Club Drive CITY-ST-ZIP Miami, Fl 33186
TITLE	NAME Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE	NAME Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE	NAME Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE	NAME Change <input type="checkbox"/> Addition <input type="checkbox"/>

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 address, with all other like empowered.

SIGNATURE: *Victor Abreu, President/CEO* 1/19/05 (305) 225-1991
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #