

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997  
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

FILED  
Sep 22 1997 8:00am  
Secretary of State

DOCUMENT # N95000003390 (0)

1. Corporation Name

ASOCIACION INTERAMERICANA DE HOMBRES DE EMPRESA  
(PALM BEACH) INC.

Principal Place of Business

Mailing Address

P.O. BOX 7564  
W PALM BEACH FL 33405-7564

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W PALM BEACH FL 33405-7564

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
07/18/1995

3a. Date of Last Report  
07/11/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

65-0596309

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GUTIERREZ, ELIZABETH  
3365 TACONIC DR.  
W. PALM BEACH FL 33406

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 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

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 D ☒ DELETE  
NAME ISASI, GABRIEL  
STREET ADDRESS 399 FOREST HILL BLVD.  
CITY-ST-ZIP W. PALM BCH FL 33405

1.1 TITLE  
1.2 NAME Darlene Carrillo D ☐ Change ☒ Addition  
1.3 STREET ADDRESS 1814 ABBEY RD  
1.4 CITY-ST-ZIP W P B, FL 33415

TITLE D ☒ DELETE  
NAME ISASI, MAIRIM  
STREET ADDRESS 399 FOREST HILL BLVD.  
CITY-ST-ZIP W PALM BEACH FL 33405-7564

2.1 TITLE  
2.2 NAME George Goyanes D ☐ Change ☒ Addition  
2.3 STREET ADDRESS 3365 Taconic DR  
2.4 CITY-ST-ZIP W P B, FL 33406

TITLE D ☒ DELETE  
NAME ISASI, GABRIEL IV  
STREET ADDRESS 399 FOREST HILL BLVD.  
CITY-ST-ZIP W PALM BEACH FL 33405-7564

3.1 TITLE  
3.2 NAME Ramon Vilarejo ☐ Change ☒ Addition  
3.3 STREET ADDRESS 3365 Taconic DR  
3.4 CITY-ST-ZIP W P B, FL 33406

TITLE D ☐ DELETE  
NAME CONTRERAS, ELENA E  
STREET ADDRESS 399 FOREST HILL BLVD.  
CITY-ST-ZIP W PALM BEACH FL 33405-7564

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE D ☐ DELETE  
NAME MARTINEZ, LUCIANO  
STREET ADDRESS 399 FOREST HILL BLVD.  
CITY-ST-ZIP W PALM BEACH FL 33405-7564

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE D ☐ DELETE  
NAME GUTIERREZ, ELIZABETH  
STREET ADDRESS 3365 TASONIC DR.  
CITY-ST-ZIP W. PALM BCH. FL 33406

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 SIGNATURE REQUIRED

CR2E037 (4/97)