

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997  
AMOUNT DUE ON OR BEFORE 9/17/97: \$81.25 (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 15 1997 8:00am  
Secretary of State

DOCUMENT # N96000002586 (3)

1. Corporation Name

DISPUTE RESOLUTION INSTITUTE OF THE AMERICAS, INC.  
C.



Principal Place of Business Mailing Address  
200 SO BISCAYNE BLVD. STE 5300 200 SO BISCAYNE BLVD. STE 5300  
MIAMI FL 33131-2339 MIAMI FL 33131-2339

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21		26		05/13/1996			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number		Applied For	
22		27		65-0724472		Not Applicable	
City & State		City & State		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip		Country		Zip		Country	
24		25		29		30	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
MASON, PAUL E 200 SO BISCAYNE BLVD. STE 5300 MIAMI FL 33131-2339				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	1.1 TITLE	D
NAME	LANDY, BURTON A	1.2 NAME	LANDY, BURTON A.
STREET ADDRESS	200 SO BISCAYNE BLVD. STE 5300	1.3 STREET ADDRESS	ONE SE. 3RD AVE, 28TH FLOOR
CITY-ST-ZIP	MIAMI FL 33131-2339	1.4 CITY-ST-ZIP	MIAMI, FL 33131
TITLE	D	2.1 TITLE	
NAME	SANTOS, JOSE A JR.	2.2 NAME	
STREET ADDRESS	201 SO BISCAYNE BLVD. STE 3000	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33131	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	
NAME	CAPABLANCA, FERNANDO	3.2 NAME	
STREET ADDRESS	701 BRICKELL AVENUE STE 2650	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33131	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	
NAME	MASON, PAUL E	4.2 NAME	
STREET ADDRESS	200 SO BISCAYNE BLVD. STE 5300	4.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33131-2339	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	D
NAME	JUNCADELLA, SALVADOR J	5.2 NAME	ENIX-ROSS, DEBORAH
STREET ADDRESS	200 SO BISCAYNE BLVD. STE 5300	5.3 STREET ADDRESS	1177 AV. OF THE AMERICAS, RM. 1945
CITY-ST-ZIP	MIAMI FL 33131-2339	5.4 CITY-ST-ZIP	NEW YORK, NY 10036
TITLE	D	6.1 TITLE	D
NAME	MARKUS, ANDREW J	6.2 NAME	MARKUS, ANDREW J
STREET ADDRESS	100 SOUTHEAST SECOND STREET STE 4000	6.3 STREET ADDRESS	201 S. BISCAYNE BLVD, 25th floor
CITY-ST-ZIP	MIAMI FL 33131	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 REQUIRED

8/1/97 (30) 982-1104

CR2E037 (4/97)