2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N96000004493

Entity Name: THE INTER-AMERICAN CENTER FOR HUMAN RIGHTS, INC.

FILED Aug 09, 2002 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
	S WILETS DOTH STREET DRES, FL 33138		
Current Mailing Address:		New Mailing Address:	
	S WILETS DOTH STREET DRES, FL 33138		
FEI Number:	65-0728851 FEI Number Applied For () FEI N	Number Not App	licable () Certificate of Status Desired ()
Name and	Address of Current Registered Agent:	Name and	Address of New Registered Agent:
WILETS, JAMES D 1160 NE 100TH STREET MIAMI SHORES, FL 33138 US			
The above in the State	named entity submits this statement for the purpose of Florida.	e of changing i	ts registered office or registered agent, or both,
SIGNATURE:			
	Electronic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () Delete ADAMS, WILLIAM E JR 3305 COLLEGE AVENUE FORT LAUDERDALE, FL 33314	Title: Name: Address: City-St-Zip:	DS (X) Change () Addition ADAMS, WILLIAM E JR 3305 COLLEGE AVENUE FORT LAUDERDALE, FL 33314
Title: Name: Address: City-St-Zip:	DVC () Delete DONOHO, DOUGLAS L 3305 COLLEGE AVENUE FORT LAUDERDALE, FL 33314	Title: Name: Address: City-St-Zip:	DC (X) Change () Addition DONOHO, DOUGLAS L 3305 COLLEGE AVENUE FORT LAUDERDALE, FL 33314
Title: Name: Address: City-St-Zip:	D () Delete JOSEPH, PAUL 3305 COLLEGE AVENUE FORT LAUDERDALE, FL 33314	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	DS () Delete SCHNABLY, STEPHEN 1311 MILLER DRIVE CORAL GABLES, FL 33146	Title: Name: Address: City-St-Zip:	D (X) Change () Addition ESQUIROL, JORGE PROF 11200 S.W. 8TH STREET GL495 MIAMI, FL 33199
Title: Name: Address: City-St-Zip:	M () Delete WILETS, JAMES D 1160 NE 100TH STREET MIAMI SHORES, FL 33138	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	DT () Delete BRODMAN, BARBARA 2208 SE 20TH ST FORT LAUDERDALE, FL 33316	Title: Name: Address: City-St-Zip:	()Change ()Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES D. WILETS M 08/09/2002

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