

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 25, 2000 8:00 am
Secretary of State

07-25-2000 90103 031 ****61.25
 02-08-2000 90050 009 ****61.25

DOCUMENT # N96000005602

1. Entity Name

ASOCIACION INTERAMERICANA DE HOMBRES DE EMPRESA ✓

Principal Place of Business

Mailing Address

4400 SW 75TH AVENUE
 MIAMI FL 33155

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 MIAMI FL 33155

2. Principal Place of Business

Catalonia 250 Suite 402

Suite, Apt. #, etc.

Coral Gables - FL

City & State

Zip

33134

Country

EU.

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-0753140

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

LOPEZ, LUIS
 4400 SW 75TH AVE.
 MIAMI FL 33155

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

After September 13, 2000 min. will be \$236.25

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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
DP	MACGREGOR, DUNIA F	250 CATALONIA AVE. #402	CORAL GABLES FL 33134	<input type="checkbox"/>
DV	DUQUESNE, PEDRO	250 CATALONIA AVE. #402	CORAL GABLES FL 33134	<input type="checkbox"/>
T	MARINO, JOSE	250 CATALONIA AVENUE #402	CORAL GABLES FL 33134	<input type="checkbox"/>
DS	CORDERO, BERNICE	250 CATALONIA AVE. #402	CORAL GABLES FL 33134	<input type="checkbox"/>
BY TRUSTEY.	GUILLEN, JOSE	250 CATALONIA AVENUE #400	CORAL GABLES FL 33134	<input type="checkbox"/>
DV	CASTELLANOS, LEONEL	250 CATALONIA AVE. #402	CORAL GABLES FL 33134	<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
President	MANSUEL ORCIBO	250 Catalonia Ave #402	C. Gables - FL 33134	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Secretary	JOSE M. MULLA	250 Catalonia Ave #402	C. Gables - FL 33134	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Vice President 1	LEONEL CASTELLANOS	250 Catalonia Ave #402	C. Gables - FL 33134	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Vice President 2	ANA M. LOPEZ	250 Catalonia Ave #402	C. Gables - FL 33134	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Vice Treas.	RODOLFO F. JIMENEZ	250 Catalonia Ave #402	C. Gables - FL 33134	<input checked="" type="checkbox"/>	<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)(l), 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:

SIGNATURE REQUIRED

7/21/00

(305) 444-2423

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (5/00)