

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90091 031 ***150.00

DOCUMENT # P01000003808
1. Entity Name
BANKERS INTERNATIONAL Realty Corporation

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1110 BRUCKELL AV.
Suite, Apt. #, etc. 806
City & State MIAMI FL
Zip 33131 Country USA

3. Mailing Address
Suite, Apt. #, etc.
City & State
4. FEI Number 65-1068578
Applied For / Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

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7. Name and Address of Current Registered Agent
Name BEATRIZ DE FORENO
Street Address (P.O. Box Number is Not Acceptable) 1110 BRUCKELL AV. Suite 806
City Miami FL Zip Code 33131

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 Beatriz Lago de Foreno
Signature, typed or printed name of registered agent and title if applicable. (NOT: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1 Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE	<u>DVPT</u>
NAME	<u>BEATRIZ DE FORENO DVPT</u>
STREET ADDRESS	<u>1110 BRUCKELL AV. Suite 806</u>
CITY- ST- ZIP	<u>MIAMI FL 33131</u>
TITLE	<u>DPS</u>
NAME	<u>HERNANDO FORENO</u>
STREET ADDRESS	<u>1110 BRUCKELL AV Suite 806</u>
CITY- ST- ZIP	<u>MIAMI FL 33131</u>
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

DO NOT WRITE IN THIS SPACE

13. 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 607, Florida Statutes, and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Beatriz Lago de Foreno BEATRIZ DE FORENO 04/25/02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E0348 (12/01)