

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000078954

FILED
Jan 04, 2007
Secretary of State

Entity Name: INTERAMERICAN FINANCE, CORP.

Current Principal Place of Business:

8401 NW 53RD TERR
105
DORAL, FL 33166

New Principal Place of Business:

8405 NW 53RD STREET
C-103
DORAL, FL 33166

Current Mailing Address:

8401 NW 53RD TERR
105
DORAL, FL 33166

New Mailing Address:

8405 NW 53RD STREET
C-103
DORAL, FL 33166

FEI Number: 20-2942868

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARRA, JOVAN A
9518 SW 148TH CIRCLE EAST
MIAMI, FL 33196 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PARRA, JOVAN A
Address: 9518 SW 148TH CIRCLE EAST
City-St-Zip: MIAMI, FL 33196

Title: VP () Delete
Name: QUINTERO, CARLOS A
Address: 965 NE 37 AVE
City-St-Zip: HOMESTEAD, FL 33033

Title: VP () Delete
Name: SIEGERT, STEWART
Address: 2380 WALNUT CT.
City-St-Zip: PEMBROKE PINES, FL 33026

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: SIEGERT, STEWART
Address: 11900 NW 14 STREET
City-St-Zip: HOLLYWOOD, FL 33026

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOVAN A. PARRA

P

01/04/2007

Electronic Signature of Signing Officer or Director

_____ Date