FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000013084 (7)

I A M INTERAMERICANA, INC.

Principal Place of Business Mailing Address

801 S. BAYSHORE DRIVE 801 S. BAYSHORE DRIVE
SUITE 463 SUITE 463

FILED Apr 27 1998 8:00am Secretary of State



801 S. BAYSHORE DRIVE SUITE 463 MIAMI FL 33131		BO1 S. BAYSHORE DRIVE SUITE 463 MIAMI FL 33131				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/10/1002		
9 Principal D	lace of Business	2a. Mailing Address				02/19/1993 4. FEI Number		pplied For
21	idee of Edamess	26	b *			65-0393924		ot Applicable
Suite, Apt.	# etc		Suito, Apt. #, etc.					Additional
22		27	27			5. Certificate of Status Desired	Fee Required	
City & State		City & State	28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip	Country 25	7ip	Count	try		8. This corporation owes or has paid the cultiple Personal Property Tax due June 30.		tangible ☑ No
9. Name and Address of Current Registered Agent			1	10. Name and Address of New Registered Agent				
GIF	RONA, ARTURO		8	31	Name			7
801	I S. BAYSHORE DRIVE		8	32	Street Addre	ress (P.O. Box Number is Not Acceptable)		
1	ITE 463 VMI FL 33131		6	33				
THE WILL IS A COLOR			_		0.5			Ondo
					City	FL	.	Code
office or re agent if an SIGNATURE	egistered agent, or both, in the Sta m lamiliar with, and accept the ob	ate of Florida. Such change was a ligations of, Section 607.0505, Flo	authorized orida Statut	by i tes.	the corporati	oration submits this statement for the purpose o ion's board of directors. I hereby accept the appropriate when reinstaling.	f changing i pointment as	its registered registered
12.	Signature typed or printed rame of registered	AND DIRECTORS	13.	Agen	it signature require	red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND	DIDECTO	DC IN 12
TITLE	PD	DELETE	1.1 TITE	F		ADDITIONS/CHANGES TO OFFICERS AND	Change	Addition
NAME	GIRONA, ARTURO		1.2 NAM		ļ		- Outdings	
STREET ADDRESS	801 S. BAYSHORE, SUITE	463			ADDRESS			
CITY-ST-ZIP	MIAMI FL 33131	100	1.4 CITY					
TITLE	WW 2111 - 2 00 10 1	DELETE	2.1 TITLE		- 281		Change	Addition
NAME			2.2 NAM				_ •	_
STREET ADDRESS			2 3 STRE	EET A	ADDRESS			1
CITY-ST-ZIP			2 4 CiTy					
TrTLE		DELETE	3.1 TITLE			· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME			3.2 NAM	PE .				
STREET ADDRESS			3.3 STRE	ET A	DDRESS			
CITY - ST - ZIP			3.4. CITY	v-St	- ZIP			
TITLE		DELETE	4.1 TITLE	E	1		☐ Change	Addition
NAME			4. 2 NAM	AE				
STREET ADDRESS			4.3 STAE	ET A	ODRESS			
City-St-ZIP			4.4 CITY		- ZIP		-	
TITLE		DELETE	5.1 TiTLE				☐ Change	Addition
NAME			5.2 NAM					
STREET ADORESS			5.3 STRE	ET A	DORESS			
CITY-S1-ZIP	· · · · · · · · · · · · · · · · · · ·		5.4 CITY		-21P		T 7 84	1177
TITLE		☐ DELETE	61 TITLE				Change	☐ Addition
NAME			6.2 NAM		İ			ŀ
STREET ADORESS			6.3 STAE					
CITY-ST-ZIP			6.4 CITY			Section 119 07(3)(i) Florida Statutes I further or		

14. 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 annual report or supplemental annual report is rue 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

ARTURO GIROM

04/16/98

305)3743977