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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000081090 (1)

INTERCHANGE REALTY, INC.

Principal Place of Business

Mailing Address

INTERCHARGE REALTY INC 3121 PONCE DE LEON BLVD CORAL GABLES FL 33134

2. Principal Place of Business

Suite, Apt. #, etc.

P.O.BOX 143401

2a. Mailing Address

Suite, Apt. #, etc.

CORAL GABLES FL 33114-3401

FILED Apr 25 1997 8:00am Secretary of State



3a. Date of Last Report 08/12/1996

Applied For

\$8.75 Additional

Not Applicable

3. Date Incorporated or Qualified

<u>11/24/1993</u> 4. FEI Number

65-0452936

22		27			5. Certificate of Status Desired Fee Required			
City & State 23		City & State			6. Election Campaign Financing \$5,00 May B Trust Fund Contribution Added to Fees			
Zip 24	Country 25		Country 30	,		Oes 🗆	No	199.032,
· · · · · · · · · · · · · · · · · · ·	9, Name and Address of Curre	nt Registered Agent		1	10. Name and Address of New Re	gistered Ag	ent	
TOY	OS, WALDO III		81	Name				
% LITMAN & ARVESU PA 837 LORCA ST				82 Street Address (P.O. Box Number is Not Acceptable)				
				office (Addition (1) . O. Box Number is Not Accoptable)				
	RAL GABLES FL 33133		83					
001	AL GADLEO I E 50 100							
			84	City		FL İ	85 Zip C	Jode
11 Pursuant	to the provisions of Sections 607 05	02 and 607 1508 Florida Statuto	s the above	e-pamod corr	poration submits this statement for the p	· · —	apriino iti	r recijetoros
office or a	registered agent, or both, in the State	e of Florida. Such change was ai	ithorized by	the corporat	tion's board of directors. I hereby accep	ot the appoin	itment as	registered
agent la	m tamiliar with, and accept the oblig	gations of, Section 607.0505, Flor	ida Statutes	S.				
SIGNATURE								
	Signature, typed or printed name of registered as			cut signature requi	red where reinstaling)	DATE	(DEOTOR	
12.	· · · · · · · · · · · · · · · · · · ·	ID DIRECTORS	13.	·	ADDITIONS/CHANGES TO OFFIC			
TITLE	DP	[] DELETE	1.1 TO LE			L] Change	Addition
NAME	TOYOS, WALDO III		1.2 NAME					
STREET ADDRESS	% 2000 S DIXIE HWY SUITE	101	13 STREET	ADDRESS				
CITY-ST-ZIP	MIAMI FL 33133		1.4 CRY - S	I - 7IP				
TITLE	D	DELETE	2.1 TILLE				Change	Additio
NAME	TOYOS, WALDO JR	4	2.2 NAM€					
STREET ADDRESS	% 2000 S DIXIE HWY SUITE	101	2.3 STRE()	ADDRESS				
CITY-ST-ZIP	MIAMI FL 33133		2 4 CHY-5	· · · }				
TITLE	DVS	DELETE	3.1 1ITLE	51 - F.II	7.		Change	Addition
NAME	TOYOS, SUSANA		3.2 NAME			_		
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	MIAMI FL 33133	101						
CITY-ST-ZIP	MAMILE 22123	DELETE	3.4. CITY-5	S1-7 P			Change	Additio
		Ed otter					1 Onlarige	L.J AUGINO
VAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET					
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TITLE	İ	☐ DELETE	5.1 TITLE			L] Change	Additio
VAME			52 NAME					
STREET ADDRESS			5.3 \$1REE1					
CITY-ST-ZIP			5.4 CITY - S	I-ZIP			·	
TITLE		☐ DELETE	6 1 THTLE] Change	Addition
NAME			6.2 NAME					
STREET ADDRESS			63 STREET	ADDRESS				
CITY-ST-ZIP			64 City-S		•			
14. I do heret	by certify that the information supplied	ed with this filing does not qualify	for the exe	mption stated	d in Section 119.07(3)(i). Florida Statute my signature shall have the same lega	s. I further oc	rtify that I	the
l am an o	ifficer or director of the cornoration a	r the receiver or trustee empowe	red to exec	Irate and that	t my signature shall have the same lega rt as required by Chapter 607, Florida S	I effect as if i	made und	ier oath; tha
appears i	in Block 12 or Block 13 if changed, of	or on an attachment with an addr	ess.	and tine topol	. do logando agonajnos por , i forida o	* • •	and they the	
	01/201-	The state of the			4/20/07 1-	206)2	11-6	622
SIGNAT	URE: //WAA	NOYOU NA	1		7/00/9/	547100	65 D	000