

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 04, 1999 8:00 am
Secretary of State

05-04-1999 90164 037 ***150.00

DOCUMENT # P93000081090

1. Corporation Name

INTERCHANGE REALTY, INC.

Principal Place of Business

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

Mailing Address

P.O.BOX 143401
CORAL GABLES FL 33114

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/24/1993

4. FEI Number

65-0452936

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip Country

28 Zip Country

9. Name and Address of Current Registered Agent

TOYOS, WALDO III
% LITMAN & ARVESU PA
837 LORCA ST
CORAL GABLES FL 33133

10. Name and Address of New Registered Agent

81 Name TOYOS, SUSANA

82 Street Address (P.O. Box Number is Not Acceptable)

83 837 LORCA ST.

84 City CORAL GABLES FL 85 Zip Code 33134

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Susana Toyos*
Signature, typed or printed name of registered agent and title if applicable.

SUSANA TOYOS D/P/S

4/28/99
Date

12. OFFICERS AND DIRECTORS

TITLE DP
NAME TOYOS, WALDO III
STREET ADDRESS % 2000 S DIXIE HWY SUITE 101
CITY-ST-ZIP MIAMI FL 33133 ☒ DELETE

TITLE D
NAME TOYOS, WALDO JR
STREET ADDRESS % 2000 S DIXIE HWY SUITE 101
CITY-ST-ZIP MIAMI FL 33133 ☐ DELETE

TITLE DVS
NAME TOYOS, SUSANA
STREET ADDRESS % 2000 S DIXIE HWY SUITE 101
CITY-ST-ZIP MIAMI FL 33133 ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DPS
1.2 NAME TOYOS, SUSANA
1.3 STREET ADDRESS 837 LORCA ST.
1.4 CITY-ST-ZIP CORAL GABLES, FL. 33134 ☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP ☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE *Susana Toyos* REQUISUSANA TOYOS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/99 305-443-7949
Date Daytime Phone #

CR2E034 (1/98)