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

Mailing Address P.O. BOX 523142

MIAMI FL 33152-3142

**PROFIT** CORPORATION ANNUAL REPORT

1997

Principal Place of Business

8411 NW 8TH ST.

SUITE 201 MIAMI FL 33126



appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000030410 (2)

INTERATLANTIC TRADING, INC.

3a. Date of Last Report 04/26/1996 04/21/1994 4. FEI Number 2a. Mailing Address Applied For 2. Principal Place of Business 65-0487885 Not Applicable 26 21 Suite, Apt. #, etc. Suite, Apt #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 28 23 Country  $Z_{\rm ID}$ Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes 🔲 No Florida Statutes 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent В1 Name DUENAS, BLANCA L 8411 NW 8TH ST. Street Address (P.O. Box Number is Not Acceptable) SUITE 201 83 **MIAMI FL 33126** Zip Code 84 City 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 Fiorida. 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. Styrial ineitype for printed name of registered agent and title if applicable (NOTE Registered Agent's gnature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. PD Change Addition DELETE THLE 1 1 TITLE PUENTES, GLADYS 1.2 NAME NAME 8411 NW 8TH ST. 1.3 STREET ADORESS STREET ALIGNESS **MIAMI FL 33126** 1.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE TITLE 2.1 TITLE PUENTES. NEFTAL NAME 2.2 NAME 8411 NW 8TH ST. 2.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33126** 2 4 CÎTY-ST-ZIP CHIY- ST-ZIP DELETE Change Addition 3.1 TITLE TillE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 34. DITY-ST-ZIP CITY -S1 - ZIP DELETE Change Addition 4.1 TITLE THILE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY - S1 - 20 ■ DELETE Change Addition 5.1 TITLE THILE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY - ST - ZIF Addition DELETE Change 6.1 TITLE THE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 64 CHTY-ST-ZIP 14. I do 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

Carros

**FILED** Mar 11 1997 8:00am Secretary of State

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3. Date Incorporated or Qualified