FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P94000037241 (4)**

1. Corporation Name

INTERAMERICAN INDUSTRIAL COMPANY, INC.

Principal Place of Business

12480 SW 8TH STREET
STE. B
MIAMI FL 33184

Mailing Address

12480 SW 8TH STREET
STE. B
MIAMI FL 33184

3. Date Incorporated or Qualified: **05/17/1994**

3a. Date of Last Report: **06/02/1995**

4. FEI Number: **65-0510744** — 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 has liability for intangible tax under s. 199.032, Florida Statutes. ☐ Yes ☒ No

2. Principal Place of Business
21 12328 SW 117 CT
Suite, Apt. #, etc.
22
City & State
23 MIAMI FL
Zip 24 33186 — County 25 USA

2a. Mailing Address
26 12328 SW 117 CT
Suite, Apt. #, etc.
27
City & State
28 MIAMI FL
Zip 29 33186 — County 30 USA

9. Name and Address of Current Registered Agent

GONZALEZ, JAQUELINE
12480 SW 8TH STREET
STE. B
MIAMI FL 33184

10. Name and Address of New Registered Agent

81 Name: HECTOR CONDE
82 Street Address (P.O. Box Number is Not Acceptable): 12328 SW 117 CT
83
84 City: MIAMI — FL — 85 Zip Code: 33186

11. Pursuant to the provisions of Section 607.0122(7), Florida Statutes, the above named corporation consents to the statement for the purpose of changing its registered office or registered agent, on file with the Division of Corporations, authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and agree to comply with, the provisions of Section 607.0122, Florida Statutes.

SIGNATURE 4/10/96
Signature of Registered Agent — Date

12. OFFICERS AND DIRECTORS

TITLE	P	☒ Delete
NAME	GONZALEZ, JAQUELINE	
STREET ADDRESS	12480 SW 8TH STREET STE. B	
CITY-ST-ZIP	MIAMI FL 33184	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	PRESIDENT	☒ Change ☐ Addition
12 NAME	HECTOR CONDE	
13 STREET ADDRESS	12328 SW 117 CT	
14 CITY-ST-ZIP	MIAMI FL 33186	
21 TITLE	V.P.	☐ Change ☒ Addition
22 NAME	JAQUELINE GONZALEZ	
23 STREET ADDRESS	12328 SW 117 CT	
24 CITY-ST-ZIP	MIAMI FL 33186	
31 TITLE		☐ Change ☐ Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE		☐ Change ☐ Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		☐ Change ☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

14. I do hereby certify that the information indicated on this report or supplemental 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 above, or in Block 14 below if I am a newly elected officer or director.

SIGNATURE: 4/10/96 305-253-4363

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Business Phone #

CR2E034 (12/95)