

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000057370 (6)

1. Corporation Name

INTERVEST INVESTMENT GROUP - II, INC.



Principal Place of Business

4131 LAGUNA ST
CORAL GABLES FL 33146

Mailing Address

4131 LAGUNA ST
CORAL GABLES FL 33146

3. Date Incorporated or Qualified
08/03/1994

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

4. FEI Number
65-0539204

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. 190.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MARTIN, PEDRO A
701 BRICKELL AVE
SUITE 1600
MIAMI FL 33131

81 Name

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

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1502, 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and the applicable

Signature, typed or printed name of registered agent and the applicable

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	☒ DELETE
NAME	BASCUAS, ERNESTO W	
STREET ADDRESS	4131 LAGUNA ST	
CITY-STATE-ZIP	CORAL GABLES FL 33131	
TITLE	D	☐ DELETE
NAME	MARTINEZ, ROBERTO M	
STREET ADDRESS	4131 LAGUNA ST	
CITY-STATE-ZIP	CORAL GABLES FL 33131	
TITLE	D	☐ DELETE
NAME	POSE, MANUEL V	
STREET ADDRESS	4131 LAGUNA ST	
CITY-STATE-ZIP	CORAL GABLES FL 33131	
TITLE	D	☐ DELETE
NAME	CARRAZANA, LUIS N	
STREET ADDRESS	4131 LAGUNA ST	
CITY-STATE-ZIP	CORAL GABLES FL 33146	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY-STATE-ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY-STATE-ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY-STATE-ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY-STATE-ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY-STATE-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 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 in connection with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Manuel V. Pose

5-13-96

305(446-1164)

CR2E034 (12/95)