

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **PA94000085403**
1. Corporation Name

INTER-GLOBAL INVESTMENTS, INC.

Principal Place of Business Mailing Address
**19 WEST FLAGLER STREET # 707
MIAMI, FL 33130**

2. Principal Place of Business
21 **19 WEST FLAGLER ST # 707**
Suite, Apt. #, etc.
22 **707**
City & State
23 **MIAMI, FL**
Zip
24 **33130**
Country
25 **U.S.**

2a. Mailing Address
26 **SAME**
Suite, Apt. #, etc.
27
City & State
28
Zip
29
Country
30

3. Date Incorporated or Qualified **1995** 3a. Date of Last Report **1995**
4. FEI Number **65-0554382** 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

9. Name and Address of Current Registered Agent

**MICHAEL G. PETIT
DISCONE BUILDING
19 WEST FLAGLER ST. # 707
MIAMI, FL 33130**

10. Name and Address of New Registered Agent

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 607.1508, 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.
3/25/96

SIGNATURE

Signature of the person filing this report (print or type name)

Signature of the Registered Agent (print or type name)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
<input checked="" type="checkbox"/> PRESIDENT, V-PRES, SEC, TREASURER	JOSE E. DEWILLO	19 WEST FLAGLER ST # 707	MIAMI, FL 33130
<input type="checkbox"/> DELETE			
<input type="checkbox"/> DELETE			
<input type="checkbox"/> DELETE			
<input type="checkbox"/> DELETE			
<input type="checkbox"/> DELETE			
<input type="checkbox"/> DELETE			

13.

12 NAME	13 STREET ADDRESS	14 CITY - ST - ZIP
1 TITLE	2 NAME	23 STREET ADDRESS
24 CITY - ST - ZIP	3 TITLE	32 NAME
33 STREET ADDRESS	34 CITY - ST - ZIP	4 TITLE
42 NAME	43 STREET ADDRESS	44 CITY - ST - ZIP
5 TITLE	52 NAME	53 STREET ADDRESS
54 CITY - ST - ZIP	6 TITLE	62 NAME
63 STREET ADDRESS	64 CITY - ST - ZIP	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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***200.00**

3/25/96

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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DATE

CR2E034 (12/95)