

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000031246

1. Entity Name

INTEROCEAN INVESTMENT CORP.

**FILED**  
**Apr 13, 2000 8:00 am**  
**Secretary of State**

04-13-2000 90009 042 \*\*\*150.00

Principal Place of Business

3195 PONCE DE LEON  
SUITE 200  
CORAL GABLES FL 33134

Mailing Address

3195 PONCE DE LEON  
SUITE 200  
CORAL GABLES FL 33134-6801

2. Principal Place of Business

% 3195 Ponce de Leon Blvd.

3. Mailing Address

% 3195 Ponce de Leon Blvd.

Suite, Apt. #, etc.

Suite 400

Suite, Apt. #, etc.

Suite 400

City & State

Coral Gables, FL

City & State

Coral Gables, FL

Zip

33134

Country

Zip

33134

Country

4. FEI Number

65-0595064

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fees Required

6. Name and Address of Current Registered Agent

ROMERO JR, CARLOS A  
3195 PONCE DE LEON BLVD  
SUITE 200  
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name

LAW OFFICE OF CARLOS A. ROMERO, JR., P.A.

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

3195 Ponce de Leon Blvd., Suite 400

City

Coral Gables

FL

Zip Code

33134

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

*Carlos A. Romero, Jr., its President*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

01-04-2000

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so. ☐  
(See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE DPST ☐ Delete  
NAME GARCIA, I B  
STREET ADDRESS 110 SIENA WAY APARTMENT 202  
CITY-ST-ZIP NAPLES FL

TITLE VP ☐ Delete  
NAME LAFFITTE, GUSTAVO SR.  
STREET ADDRESS 110 SIENA WAY APARTMENT 202  
CITY-ST-ZIP NAPLES FL

TITLE VP ☐ Delete  
NAME LAFFITTE, GUSTAVO JR.  
STREET ADDRESS 110 SIENA WAY APARTMENT 202  
CITY-ST-ZIP NAPLES FL

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Carlos A. Romero, Jr.*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/7/00  
Date

(941) 774-4919  
Daytime Phone #