

**PROFIT CORPORATION
ANNUAL REPORT
1996**



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

Amended Annual Report \$61.25
FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DOCUMENT # P95000037446
1. Corporation Name

INTERNATIONAL FIDELITY INVESTORS, CORP.

Principal Place of Business Mailing Address
**2000 SOUTH DIXIE HIGHWAY
SUITE 104A
MIAMI, FLORIDA 33133**

2. Principal Place of Business
21 2000 SOUTH DIXIE HIGHWAY
Suite, Apt. #, etc.
22 SUITE 104A
City & State
23 MIAMI, FLORIDA 33133
Zip Country
24 33133 **25 DADE** **29** **30**

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

3. Date Incorporated or Qualified **3a. Date of Last Report**
MAY 9, 1995
4. FEI Number **65-0580039** 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

ANGELA OSPINA
2000 SOUTH DIXIE HIGHWAY
SUITE 104A
MIAMI, FLORIDA 33133

10. Name and Address of New Registered Agent

81 Name **ANGELA OSPINA**
82 Street Address (P.O. Box Number is Not Acceptable) **2000 SOUTH DIXIE HIGHWAY**
83 SUITE 104A
84 City **MIAMI, FL** **85 Zip Code** **33133**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

11-14-96
DATE

12. OFFICERS AND DIRECTORS
TITLE **DIRECTOR** ☒ DELETE
NAME **BERT A. VELUNZA**
STREET ADDRESS **2000 SOUTH DIXIE HIGHWAY, SUITE 104A**
CITY-ST-ZIP **MIAMI, FLORIDA 33133**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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
1.1 TITLE **DIRECTOR** ☐ Change ☒ Addition
1.2 NAME **ANGELA OSPINA**
1.3 STREET ADDRESS **2000 SOUTH DIXIE HIGHWAY, SUITE 104A**
1.4 CITY-ST-ZIP **MIAMI, FLORIDA 33133**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-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 the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

ANGELA OSPINA
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-14-96
Date

(305) 285-0808
Daytime Phone #

CR2E034 (3/96)