

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000083025 (3)

1. Corporation Name

INTERAMERICAS CONSULTING, IMPORT, EXPORT INC.

Principal Place of Business

22716 SW 65TH WAY
BOCA RATON FL 33428

Mailing Address

22716 SW 65TH WAY
BOCA RATON FL 33428



2. Principal Place of Business

21 22716 SW 65th way

22 Suite, Apt. #, etc

23 City & State

23 Boca Raton FL

24 Zip

24 33428

25 Country

25 U.S.A

2a. Mailing Address

26 22716 SW 65th way

27 Suite, Apt. #, etc

28 City & State

28 Boca Raton FL

29 Zip

29 33428

30 Country

30 U.S.A

3. Date Incorporated or Qualified

10/30/1995

3a. Date of Last Report

2/1/96

4. FEI Number

05-0478535

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

HEIDAL, IRACEMA V
22716 SW 65TH WAY
BOCA RATON FL 33428

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.

SIGNATURE

Signature, typed or printed name of registered agent, if applicable

DATE Registered Agent signature required at least 10 days

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ DELETE
	Iracema Heidal	22716 SW 65th way	Boca Raton FL 33428	☒
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ DELETE
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ DELETE
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ DELETE
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ DELETE
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ Change ☐ Addition
2. TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ Change ☐ Addition
3. TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ Change ☐ Addition
4. TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ Change ☐ Addition
5. TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ Change ☐ Addition
6. TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ Change ☐ Addition
7. TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ Change ☐ Addition
8. TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ Change ☐ Addition

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***200.00

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 or empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13, unchanged, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/96 407-8526427

05 5/11/96

CR2E034 (12/95)