

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 02, 2003 8:00 am
Secretary of State

06-02-2003 90190 012 ***150.00

DOCUMENT # **P95000083025**

1. Entity Name

Interamericas Consulting, Import, Export, Inc.



DO NOT WRITE IN THIS SPACE

90138439

2. Principal Place of Business
22716 SW 65th Way

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.
same

DO NOT WRITE IN THIS SPACE

City & State
Boca Raton, FL

City & State

4. FEI Number 65-0478535

Applied For

Not Applicable

Zip 33428

Country USA

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Iracema V. Heidal

Street Address (P.O. Box Number is Not Acceptable)
22716 SW 65th Way

City Boca Raton

FL

Zip Code 33428

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution: ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME Iracema V. Heidal
STREET ADDRESS 22716 SW 65th Way
CITY-ST-ZIP Boca Raton, FL 33428

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12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/02)