FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATI

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000087654 (6)

I.V. INTERNATIONAL ENTERPRISES, CORP.

FILED
May 06 1997 8:00am
Secretary of State



Principal Place	Mailing Address	dress			JU 88401 48101 1		JI VIS I (VI I	
9600 N.W. SUTH TERRACE MIAMI FL SUTE		9010 S.W. 137TH AVE. SUITE 113						
		MIAMI FL 33186-1437 US			3. Date Incorporated or Qualified 11/15/1995		nte of Last F 09/1996	Report
	lace of Business	2a. Mailing Address		··· ·· · · · · · · · · · · · · · · · ·	4. FEI Number		Āſ	pplied For
	S.W. 137 Ave.	26			та 🛊 таки ты тый мейна жайы бөтейний аймий колот төмүн жана жана жана жана жана жана жана жа			ot Applicable
Suite, Apt.	#, elc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional
22 113 City & State		City & State					·	equired
23 MIAM		28			6. Election Campaign Financing Trust Fund Contribution	П	,	May Be to Fees
Zip Country 24 33186 25 USA		Zip			8. This corporation has liability for	for intangible tax under s 199 032,		
24 05.0	9. Name and Address of Current	29 Registered Agent	30]		10. Name and Address of New Re			
ORE	REGON, VICTORIA A			B1 Name		9		
8530	0 N.W. 30TH TERRACE		82 Street Ac		ddress (P.O. Box Number is Not Acceptable)			
MIA	MI FL 33122			B3	 			
				B4 City	 	 	85 Zip	Code
				' '		FL		
agent. I a	m familiar with, and accept the obliga	dions of, Section 607.0505, F	-lorida Statu	ites.	orporation submits this statement for the ration's board of directors. I horeby acce	DATE		
12.	OFFICERS AND		18.		ADDITIONS/CHANGES TO OFFI	CERS AND		
TITLE	PD	☐ DELETE	1.4 1010	.E			☐ Change	Addition
NAME	OBREGON, VICTORIA A		. 1.2 NA	NE				
STREET ADDRESS	8530 N.W. 30TH TERRACE			EET ADDRESS				
CITY-ST-ZIP	MIAMI FL 33122	DELETE		Y-ST-ZIP			Change	Addition
TITLE	VD Brode, Irene	☐ DEFELE	2.1 1111				☐ Change	Addition
NAME STREET ADDRESS	8530 N.W. 30TH TERRACE		2.2 NAI	1	·			
	MIAMI FL 33122			EET ADDRESS Y-S1-ZIP				
CITY-ST-ZIP TITLE	MPAIN 1 L GOTEL	DELETE	3.4 1(1)				Change	Addition
NAME	÷		3.2 NA				_ ,	
STREET ADDRESS			3.8 STR	EET ADDRESS				
CITY-ST-ZIP			3.4. CIT	Y-ST-ZIP				
TITLE		DELETE	4.1 1111	.E			Change	Addition
NAME			4. 2 NA	ME				
STREET ADDRESS			4.3 STF	EE1 ADDRESS				
CITY-ST-ZIP		T beiere		Y - ST - ZIP				4 4 4 5 5
TATLE		☐ DELETE	5.1 1111				Change	Addition
NAME OTOTET ADDOCOG			5.2 NAI					
STREET ADDRESS				EET ADDRESS				
CITY-ST-ZIP TITLE		DELETE	5.4 CH 6.1 TH	Y - ST- ZIP			Change	Addition
NAME			6 2 NA					
STREET ADDRESS				EET ADDRESS				
CITY-ST-ZIP			1	Y - ST - ZIP				
14. I do heret	by certify that the information supplied	with this filing does not que	alify for the o	exemption state	ted in Section 119.07(3)(i), Florida Statute	es. I further	certify that	the
informatio	on indicated on this annual report or si	upplemental annual report is the receiver or trustee empo	s true and a owered to ex	ccurate and th	ted in Section 119.07(3)(i), Florida Statul nat my signature shall have the same log oort as required by Chapter 607, Florida oort	jat effect as	s if made un	nder oath;

IRENE BRODE