2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000097870

Entity Name: INTERNATIONAL BANCORP OF MIAMI, INC.

FILED Apr 28, 2006 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
121 ALHAMBRA PLAZA, PENTHOUSE 2 CORAL GABLES, FL 33134						
Current Mailing Address:				New Mailing Address:		
121 ALHAMBRA PLAZA, PENTHOUSE 2 CORAL GABLES, FL 33134						
FEI Number: 59-2678471 FEI Number Applied For () FEI			FEI Num	umber Not Applicable () Certificate of Status Desired (X)		
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
VALDES, ALBERTO T 121 ALHAMBRA PLAZA, PENTHOUSE 2 CORAL GABLES, FL 33134 US				VALENTE, LUIS A 121 ALHAMBRA PLAZA, 15TH FLOOR CORAL GABLES, FL 33134 US		
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: LUIS A VALENTE				04/28/2006		
Electronic Signature of Registered Agent						Date
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	SOLER, FRANSI	PLAZA , PENTHOUSE 2		Title: Name: Address: City-St-Zip:	()	Change () Addition
Title: Name: Address: City-St-Zip:	POMA, RICARDO	PLAZA , PENTHOUSE 2		Title: Name: Address: City-St-Zip:	ATWILL, WILLIA	A PLAZA , PENTHOUSE 2
Title: Name: Address: City-St-Zip:	RIBADENEIRA, I	PLAZA , PENTHOUSE 2		Title: Name: Address: City-St-Zip:	()	Change () Addition
Title: Name: Address: City-St-Zip:	MEJIA, CARLOS	PLAZA , PENTHOUSE 2		Title: Name: Address: City-St-Zip:	()	Change () Addition
Title: Name: Address: City-St-Zip:	VALDES, ALBER	PLAZA , PENTHOUSE 2		Title: Name: Address: City-St-Zip:	()	Change () Addition
Title: Name: Address: City-St-Zip:	PRESTAMO, ALE	PLAZA , PENTHOUSE 2		Title: Name: Address: City-St-Zip:	PRESTAMO, AL	A PLAZA , PENTHOUSE 2

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUIS A VALENTE RA 04/28/2006