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

PROFIT CORPORATION ANNUAL REPORT

1997

STREET ADDRESS

appears in Block 12 or Block 13 if ch



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P96000021858 (1)

INTERNATIONAL FINANCIAL SERVICES. INC.

Principal Place of Business Mailing Address 2225 MERIDIAN AVENUE 2225 MERIDIAN AVENUE MIAMI BEACH FL 33139-1513 MIAMI BEACH FL 33139 3. Date Incorporated or Qualified 3a. Date of Last Report 03/11/1996 NIA 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country 6. This corporation has liability for Intangible tas under s. 199.032, Florida Statutes
Yes
You Country Zip 29 30 24 25 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name OLIVA, RUBEN 2250 S.W. 3RD AVENUE Street Address (P.O. Box Number is Not Acceptable) THIRD FLOOR **MIAMI FL 33129** 83 84 Zin 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 Signal are typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIFIECTORS IN 12 DELETE Change Addition TITLE 1.1 TITLE HERNANDEZ. LUIS III NAME 1.2 NAME 2225 MERIDIAN AVENUE STREET ADDRESS 1.3 STREET ADDRESS MIAMI BEACH FL 33139 1.4 City-ST-ZIP CITY - ST - ZIP DELETE Change ___ Addition TITLE 2.1 TITLE HERNANDEZ, LORENZO NAME 22 NAME 2225 MERIDIAN AVENUE 2.3 STREET ADDRESS STREET ADDRESS MIAMI BEACH FL 33139 CITY-S1-ZIP 2. 4 CITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE Change HERNANDEZ, IRENE NAME 3.2 NAME 2225 MERIDIAN AVENUE STREET ADDRESS 3.3 STREET ADDRESS MIAMI BEACH FL 33139 CITY - S1 - ZIP 3.4. CITY-ST-ZIP DELETE Addition 4.1 TITLE TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - \$T - ZIP DELETE Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS C(1Y-S1-ZIP 5.4 CITY - ST-ZIP DELETE 6.1 TITLE Addition TITLE NAME 6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Hurther 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 conforation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE

3-21-QT 308-534-1004

96/6)

FILED

Apr 24 1997 8:00am

Secretary of State