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

PROFIT CORPORATION ANNUAL REPORT

1997

2. Principal Place of Business

21



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000029694 (2)

IVENGUANTES USA, INC.

•	
Principal Place of Business	Mailing Address
1540 N.E. 33RD ST. POMPANO BEACH FL 33064	1540 N.E. 33RD ST. Pompano Beach FL 33064-6732
•	

2a. Mailing Address

FILED Apr 23 1997 8:00am Secretary of State



3a. Date of Last Report

Applied For

Not Applicable

3. Date Incorporated or Qualified

4, FEI Number 65-065 6008

04/04/1996

Sulte, Apt.	pt. #, etc. Suite, Apt. #, etc. 27		5. Certificate of Status Desired S8.75 Additional Fee Required			
City & Stat	е	City & State		6. Election Campaign Financing \$5.00 May Be		
23		28		Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Country	8. This corporation has liability for intangible tax under s. 199.032,		
24	25	29	30	Florida Statutes		
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Registered Agent		
CAY	CEDO, JOSE A		[B1] I	Name		
1540 N.E. 33RD ST.			82	82 Street Address (P.O. Box Number is Not Acceptable)		
PON	MPANO BEACH FL 33064			Control of the contro		
· • •			83			
,		;	84	City 85 Zip Code		
			[7]	84 City FL 85 Zip Code		
11. Pursuant	to the provisions of Sections 607.050.	2 and 607.1508, Florida Stati	tes, the above-n	named corporation submits this statement for the purpose of changing its registered		
agent la	egistered agent, or both, in the State im familiar with, and accept the obliga	ot Florida. Such change was ations of, Section 607.0505. F	autnorized by the lorida Statutes.	the corporation's board of directors. I hereby accept the appointment as registered.		
SIGNATURE						
SIGNATIONE	Signature typed or printed name of registered age	of and title if applicable (NC	R. Bag-stered Agent a	v. signature required when reinstating) DATE		
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	∐ DELET€	1.1 TITLE	☐ Change ☐ Addilion		
NAME	CAYCEDO, JOSE A		1.2 NAME			
STREET ADDRESS	1540 N.E. 33RD ST.		13 STREET AD	ADDRESS		
CITY-ST-ZIP	POMPANO BEACH FL 33064		14 CITY - \$1 - 7			
TITLE		DELETE	2.1 TITLE	☐ Change ☐ Addition		
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET AD	ADORESS		
CITY-ST-ZIP	<u> </u>		2.4 CITY-\$1-	1-ZIP		
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition		
NAME	,		3.2 NAME			
STREET ADDRESS			3.3 STREET AD	ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST-	1-719		
TITLE		☐ DELETE 4.1 TOLE		Change Addition		
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET AD	ADDRESS		
CITY-ST-ZIP			4.4 Crity - S1 - 2	- ZIP		
TITLE		DELETE 51 TITLE		☐ Change ☐ Addition		
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET AD	ADDRESS		
CITY-ST-ZIP		5.4 CID		- 2IP		
TITLE		DELETE	6.1 TITLE	Change Addition		
			6.2 NAME			
NAME				1		
NAME STREET ADDRESS			6.3 STHEFT AD	ADDRESS		
····-			6.3 STREET AD 6.4 CITY: ST - I			

The allows Covered 11-02-97