

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000048769

1. Entity Name

INTERAMERICAN HOTELS CORP.

Principal Place of Business

340 BISCAYNE BLVD.  
SUITE 100  
MIAMI FL 33132

Mailing Address

270 NE 4TH STREET  
SUITE #100  
MIAMI FL 33132  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0676854

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete  
NAME MICANGELI, MAURIZIO  
STREET ADDRESS 270 NE FOURTH STREET  
CITY-ST-ZIP MIAMI FL 33132

TITLE VD ☐ Delete  
NAME TUPINI, CLAUDIO  
STREET ADDRESS 270 NE FOURTH STREET  
CITY-ST-ZIP MIAMI FL 33132

TITLE V ☐ Delete  
NAME CASTERA, BENOIST  
STREET ADDRESS 270 NE FOURTH STREET  
CITY-ST-ZIP MIAMI FL 33132

TITLE D ☐ Delete  
NAME CORBEDDU, AMTONIO  
STREET ADDRESS 270 NE FOURTH STREET  
CITY-ST-ZIP MIAMI FL 33132

TITLE D ☐ Delete  
NAME LAROCHE, RICHARD F  
STREET ADDRESS 2103 SHANNON DR.  
CITY-ST-ZIP MURFREESBORO TN 37129

TITLE D ☐ Delete  
NAME FRIEDBAUER, ROGER  
STREET ADDRESS 201 S. BISCAYNE BLVD., 1500 MIAMI CTR.  
CITY-ST-ZIP MIAMI FL 33131

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 name, as an officer or director of the corporation or the receiver or trustee empowered to execute this report or a changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR

Benoist Castera

305-358-0661

Date

Daytime Phone #

CR2E034 (10/00)

**FILED**  
**Feb 01, 2001 8:00 am**  
**Secretary of State**

02-01-2001 90010 043 \*\*\*150.00

010103



DO NOT WRITE IN THIS SPACE