

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

**FILED**  
**May 13 1997 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # P96000054089 (3)**

1. Corporation Name  
**I.V.C., INC.**




Principal Place of Business: **7279 NW 36TH STREET MIAMI FL 33166**  
 Mailing Address: **7279 NW 36TH STREET MIAMI FL 33166-8702**

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21	2874 N.W. 79 AVE	26	2874 N.W. 79 AVE	06/25/1996	
22		27		4. FEI Number	Applied For / Not Applicable
23	MIAMI, FL 33122	28	MIAMI, FL 33122	65-0679646	
24	33122	29	33122	5. Certificate of Status Desired	\$8.75 Additional Fee Required
25	USA	30	USA		\$5.00 May Be Added to Fees
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	

**CARRILLO, HERNANDO**  
**7279 NW 36TH STREET**  
**MIAMI FL 33166**

81 Name: **HERNANDO CARRILLO**  
 82 Street Address (P.O. Box Number is Not Acceptable): **2874 N.W. 79 AVE**  
 83  
 84 City: **MIAMI** FL 85 Zip Code: **33122**

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 provisions of Section 607.0505, Florida Statutes.

SIGNATURE:  **AGENT** 04/07/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	PRESIDENT
NAME	CARRILLO, HERNANDO	12 NAME	HERNANDO CARRILLO
STREET ADDRESS	7279 NW 36TH STREET	13 STREET ADDRESS	2874 N.W. 79 AVE
CITY-ST-ZIP	MIAMI FL 33166	14 CITY-ST-ZIP	MIAMI, FL 33122
TITLE	VD	21 TITLE	VICE-PRESIDENT
NAME	ROS, FLORENCIO	22 NAME	FLORENCIO ROS
STREET ADDRESS	7279 NW 36TH STREET	23 STREET ADDRESS	2874 N.W. 79 AVE
CITY-ST-ZIP	MIAMI FL 33166	24 CITY-ST-ZIP	MIAMI, FL 33122
TITLE	SD	31 TITLE	SECRETARY/DIRECTOR
NAME	BEDOYA, JULIETA	32 NAME	JULIETA BEDOYA
STREET ADDRESS	7279 NW 36TH STREET	33 STREET ADDRESS	2874 N.W. 79 AVE
CITY-ST-ZIP	MIAMI FL 33166	34 CITY-ST-ZIP	MIAMI, FL 33122
TITLE		41 TITLE	
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 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. I further 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 corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:  **PRESIDENT** 04/07/97

CR2E034 (9/96)