

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 04, 1999 8:00 am
Secretary of State

05-04-1999 90182 041 ***150.00

DOCUMENT # P97000002818

1. Corporation Name

INTER-AMERICAN GROUP, INC.

Principal Place of Business

11830 SW 112TH AVE CIR
MIAMI FL 33176-3955
US

Mailing Address

P O BOX 165333
MIAMI FL 33116-5333
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/10/1997

4. FEI Number

65-0717625

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 7700 SW 88 ST

Suite, Apt. #, etc.

22 SUITE 515

City & State

23 MIAMI FL

Zip

24 33156

Country

25 USA

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

9. Name and Address of Current Registered Agent

SANTOS, REYDEL
11830 SW 112TH AVE CIR
MIAMI FL 33176

10. Name and Address of New Registered Agent

81 Name

MAX F. BLAYA

82 Street Address (P.O. Box Number is Not Applicable)

7700 SW 88 STREET

83

SUITE 515

84 City

MIAMI

FL

85

33156

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 MAX F. BLAYA

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4-28-99

12. OFFICERS AND DIRECTORS

TITLE PD
NAME SANTOS, REYDEL
STREET ADDRESS 11830 SW 112 AVE. CIR.
CITY-ST-ZIP MIAMI FL 33176-3955

TITLE STD
NAME BLAYA, MAX
STREET ADDRESS 7440 SW 127TH ST.
CITY-ST-ZIP MIAMI FL 33156

TITLE VPD
NAME MENENDEZ, MARIO
STREET ADDRESS 4905 RIVIERA DRIVE
CITY-ST-ZIP CORAL GABLES FL 33146

TITLE D
NAME SANTOS, LEEBERTO
STREET ADDRESS 10101 SW 50 TERR
CITY-ST-ZIP MIAMI FL 33165

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/D
1.2 NAME SANTOS, REYDEL
1.3 STREET ADDRESS 7700 N. KENDALL DRIVE #515
1.4 CITY-ST-ZIP MIAMI, FL 33156

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME SANTOS, REEMBERTO
4.3 STREET ADDRESS 10101 SW 50TH TERRACE
4.4 CITY-ST-ZIP MIAMI, FL 33165

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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, with all other like empowered.

SIGNATURE: Reydel Santos REYDEL SANTOS, DR.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-99

Date

(305) 271 8842

Daytime Phone #

0177446

CR2E034 (11/98)