

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

FILED
Apr 16, 1999 8:00 am
Secretary of State

04-16-1999 90045 031 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # P97000099857

1. Corporation Name
 INTERAMERICA TRADING CORPORATION



Principal Place of Business
 1900 S.W. 6TH PLACE
 BOCA RATON FL 33486

Mailing Address
 1900 S.W. 6TH PLACE
 BOCA RATON FL 33486

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
 21 Suite, Apt. #, etc.
 22 City & State
 23 Zip
 24 Country

2a. Mailing Address
 26 Suite, Apt. #, etc.
 27 City & State
 28 Zip
 29 Country

3. Date Incorporated or Qualified
 11/21/1997

4. FEI Number
 65-0795981

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

9. Name and Address of Current Registered Agent
 KOONTZ, JESSE L
 1900 S.W. 6TH PLACE
 BOCA RATON FL 33486

10. Name and Address of New Registered Agent
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City FL 85 Zip 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	KOONTZ, JESSE L	
STREET ADDRESS	1900 S.W. 6TH PLACE	
CITY-ST-ZIP	BOCA RATON FL 33486	
TITLE	V.P. OPERATIONS	<input type="checkbox"/> DELETE
NAME	ANDREJ MARTINOVIC	
STREET ADDRESS	4203 TRANQUILITY DR.	
CITY-ST-ZIP	HIGHLAND BEACH FL 33487	
TITLE	V.P. MARKETING	<input type="checkbox"/> DELETE
NAME	SCOTT LAMOLA	
STREET ADDRESS	7740 S. W. 54th COURT	
CITY-ST-ZIP	SOUTH MIAMI FL 33143	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	V.P. OPERATIONS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	ANDREJ MARTINOVIC	
1.3 STREET ADDRESS	4203 TRANQUILITY DR.	
1.4 CITY-ST-ZIP	HIGHLAND BEACH FL 33487	
2.1 TITLE	V.P. MARKETING	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	SCOTT LAMOLA	
2.3 STREET ADDRESS	7740 S W 54th COURT	
2.4 CITY-ST-ZIP	SOUTH MIAMI FL 33143	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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)(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, with all other like empowered.

SIGNATURE: JESSE L. KOONTZ *Jesse L. Koontz* 4/9/99 (361) 392-6711
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)