

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 21, 2003 8:00 am
Secretary of State

01-21-2003 90546 011 ***150.00

DOCUMENT # P97000106152

1. Entity Name
INTERNATIONAL ACCOUNTING CONSULTANTS INC.



Principal Place of Business
10511 SW 88 STREET
C 103
MIAMI FL 33176

Mailing Address
10511 SW 88 STREET
C 103
MIAMI FL 33176



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 65-0800109

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TORO, MARCOS
5545 SW 8 STREET
SUITE 105
MIAMI FL 33134

Name **Richard TORO**
Street Address (P.O. Box Number is Not Acceptable)
6485 SW 128 CT.
City **Miami** FL **33183**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Richard E. Toro*
Signature, typed or printed name of registered agent and title if applicable

Richard TORO
(NOTE: Registered Agent signature required when reinstating)

1/13/03
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **TORO, RICHARD**
STREET ADDRESS **6485 SW 128 CT**
CITY-ST-ZIP **MIAMI FL 33183**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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12. 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 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: *Richard E. Toro* **REQUIRED** *Richard TORO (President)* *1/13/03* *(305) 262-5500*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)