## 2000 UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT#** 1. Entity Name

P99000 102749

INTERNATIONAL LOAMS, ace of Business Mailing Address

Principal Place of Business

## Apr 10, 2000 8:00 am Secretary of State

04-10-2000 90113 006 \*\*\*158.75

¡Principal Place of	Business	3. Mailing Address	Mailing Address		30021152			
ickell R Suite, Apt. #, etc.	oads Building_	Brickell Roa Suite, Apt. #, etc.	ads Build	ing	DO NOT WR			
City & State	1	City & State Miami, Flori	ida	601	B 4. FEI Number 650940894		No	oplied For ot Applicable
Zip 33129	Country USA	Zip · 33129	Country		5. Čertificate of Status Desired	X]	\$8.75 Add Fee Require	
6.	Name and Address of Current	Registered Agent			7. Name and Address of New	Registered	l Agent	·
-					A. Brewer P.O.: Box Number is: Not Acceptable	e)		
. The above pamee	d antitu cultimits this statement for	r the ourness of changing its	K <sup>City</sup> K <b>ey</b>	Bisc	etree Dr. Apt sayne ad agent, or both, in the State of F	F	- 1 7:- 0 1	<sup>e</sup> 49
SIGNATURE Signatur	Bruger G	Charles A		rVi	ice-President/Direc		04/03	3 <u>/20</u> 00
	is eligible to satisfy its Intangible ment and elects to do so. back)	(2) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	III. FEE IS \$150.0 000 Fee will be \$5 ble to Departmen	550.00	<b>海科学科</b>	on.	Added	<b>0</b> May Be d to Fees
l <b>1</b> .	OFFICERS AND	DIRECTORS	12.	·-·	ADDITIONS/CHANGES TO OF	FICERS AN		
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TREET ADDRESS			STREET ADDRESS		SW 15th Rd.,	Suite	-601B-	
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		ALI - 201		todia De	ction 119 07(3)(i) Florida Statutes	) further a	artify that the	nformation

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