

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00 ~~\$915.00~~

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97 AUG 15 PM 2:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. McMath Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # S23631
1. Corporation Name

International Business Export Corp.

Principal Place of Business	Mailing Address
2922 N.W. 109th Ave. Miami, FL 33172	2922 N.W. 109th Ave. Miami, FL 33172

3. Date Incorporated or Qualified 1/9/91	3a. Date of Last Report
4. FEI Number 65-0237374	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent

Reyes, Milda A.
2922 N.W. 109th Ave.
Miami, FL 33172

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number Is Not Acceptable)	
83	
84 City	FL

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.

Milda A. Reyes
Signature, typed or printed name of registered agent and title if applicable

8/11/97
DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D/P <input type="checkbox"/> DELETE	1.1 TITLE
NAME	Barona, Emilio	1.2 NAME
STREET ADDRESS	Carrera 15A, #13675, #3	1.3 STREET ADDRESS
CITY-ST-ZIP	Bogota, Colombia	1.4 CITY-ST-ZIP
TITLE	D/S/T <input type="checkbox"/> DELETE	2.1 TITLE
NAME	de Barona, Alba L.	2.2 NAME
STREET ADDRESS	Carrera 15A, #13675, #3	2.3 STREET ADDRESS
CITY-ST-ZIP	Bogota, Colombia	2.4 CITY-ST-ZIP
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE
NAME		3.2 NAME
STREET ADDRESS		3.3 STREET ADDRESS
CITY-ST-ZIP		3.4 CITY-ST-ZIP
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE
NAME		4.2 NAME
STREET ADDRESS		4.3 STREET ADDRESS
CITY-ST-ZIP		4.4 CITY-ST-ZIP
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE
NAME		5.2 NAME
STREET ADDRESS		5.3 STREET ADDRESS
CITY-ST-ZIP		5.4 CITY-ST-ZIP
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE
NAME		6.2 NAME
STREET ADDRESS		6.3 STREET ADDRESS
CITY-ST-ZIP		6.4 CITY-ST-ZIP

300002270983-3 -08/19/97--01031--024 ****915.00 ****915.00	<input type="checkbox"/> Change <input type="checkbox"/> Addition
REINSTATEMENT 96-97	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<i>A. Alan</i> 8/15/97	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<i>A. Alan</i> 8/15/97	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 as an attachment with an address.

SIGNATURE: *Emilio Barona* (305) 477-5256

CR2E034 (9/96)