SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

S86645

SIGNATURE: NEIL BLEECICHUCTZ

(6)

FILED
Aug 19 1998 8:00am
Secretary of State

INTER-AMERICAN CAPITAL CORP.					
Principal Plac	e of Business	Mailing Address			
ONE NORTH O	CEAN BLVD	ONE NORTH OCEAN BLVD.			
# 9		STE. 9			
BOCA RATON	FL 334 3 2	BOCA RATON FL 33432		DO NOT WRITE IN THIS SP ACE	
US		US		3. Date Incorporated or Qualified	
2. Principal P	lace of Business	2a. Mailing Address		10/11/1991 4. FEI Number Applied For	
—¬		26 4111 M.W. 78	THE TEAD	65-0341131 Not Applicable	
21 NACTUE 26 4111 M.W. 70 Suite, Apt. #, etc. Suite, Apt. #, etc.		7 7,0,0,0	\$8.75 Additional		
27 C/O NEIL Bu		ERLICHOLT Z	5. Certificate of Status Desired Fee Required		
City & Stat		City & State		6. Election Campaign Financing \$5.00 May Be	
23 - 4 4 D		28 LAUDERHILL	FLA,	Trust Fund Contribution	
Zip 24 337	Country	Zip	Country	8. This corporation owes or has paid the current year intangible	
24 3337	9. Name and Address of Current		O Browns	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent	
BUE	RCKHOLTZ, NEIL		81 Name	O	
	E. B O CA RATON RD.	caf		NEIL BURRCKHOLTZ	
	A RATON FL 33432	6 HAMMESS	82 Street	Address (P.O. Box Number is Not Acceptable)	
	A 1141011 1 E 00402	ADDRESS CHUY	3 83	- All Miss. 15 - Machine	
ļ		DNCY		ANOWEL HICK, T LA,	
		V	1 1 4	ANDERHILL, FLA. FL 85 Zip Code 33313	
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					
office or agent. I a	registered agent, or both, in the State o am familiar with, and accept the obligat	of Florida. Such change was autions of, section 607,0505, Floric	horized by the corp la Statutes.	oration's board of directors. I hereby accept the appointment as registered	
SIGNATURE					
	Signature, typod or printed name of registered agent			re required when reinstating) DATE ADDITION (A)	
12.	OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	BUERCKHOLTZ, NEIL	[_] DELETE	1.2 NAME	BUENCKHOLTE, NEK C/O 4111 N.W. 75 TH TERR, ADDRESS	
STREET ADDRESS	ONE NORTH OCEAN BLVD., #9	r e	1.3 STREET ADDRESS	C/O 4111 N.W. 75 TERR. ASTRACT	
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY-ST-ZIP	LAUDERHELL, KLA 33313	
TITLE		DELETE	2.1 TITLE	Change Addition	
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE	Change Addition	
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE NAME		L_) DELETE	4.1 TITLE 4.2 NAME	Change Addition	
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE	Charge Addition	
NAME		[] occere	5.2 NAME	Change Maddion	
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE	Change Addition	
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
14. I hereby co	ertify that the information supplied with to this annual report or supplemental a	his filing does not qualify for the naual report is true and accurate	exemption stated in e and that my signa	section 119.07(3)(i), Florida Statutes. I further certify that the information sture 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.					