PROFIT CORPORATION ANNUAL REPORT 1999

1. Corporation Name

DOCUMENT # **S86645**



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90073 040 ***150.00

INTER-A	MÉRICAN CAPITAL CORP.					
Principal Place	e of Rusidess	Mailing Address /			ileki bibli bibli bibli bibli bi	DIS OPEN IDEA
ONE NORTH OCEAN BLVD. 4111 NW 75TH TERR C/O NEIL BUERCKHOLTZ BOCA RATON FL 33432 LAUDERHILL FL 33313			DO NOT WRITE IN	THIS SPACE		
0\$		U\$		3. Date Incorporated or Qualifed 10/11/1991		
──~ . ` <i>•</i> ~.	lace of Business	2a. Mailing Address 26 500 SHERW	000 Hices Dr.	4. FEI Number 65-0341131	Not	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 A Fee Rec	
City & Stat	e	City & State 28 Wngstowy - Sa-	CEM, NG,	6. Election Campaign Financing Trust Fund Contribution	\$5.00 (Added to	, ,
Zip	Country	Zip	Country 30 USA	This corporation owes the current year Personal Property Tax.		□No
	9. Name and Address of Curren			10. Name and Address of New Registe	ered Agent	
			81 Name	_		
C/O	RCKHOLTZ, NEIL 4111 NW 75TH TERR		82 Street Add	ress (P.O. Box Number is Not Acceptable)		
LAUI	DERHILL FL 33313	•	83			
			84 City		FL 85 Zip C	ode
office or o	to the provisions of Sections 607.050 registered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was au	ithorized by the corporati	poration submits this statement for the purpor on's board of directors. I hereby accept the a	se of changing its oppointment as reg	registered jistered
SIGNATURE			Registered Agent signature require	ad when reinstating) DA	<u></u>	
12.	Signature, typed or printed name of registered age	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER		RS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		Change	Addition
NAME	BUERCKHOLTZ, NEIL		1.2 NAME			
STREET ADDRESS	C/O 4111 NW 75TH TERR		1.3 STREET ADDRESS			ĺ
CITY-ST-ZIP	LAUDERHILL FL 33313		1.4 CITY-ST-ZIP			l
TITLE		☐ DELETE	2.1 TITLE		☐ Change	☐ Addition
NAME			2.2 NAME			
STREET ADDRESS	n war da in a	2	2.3 STREET ADDRESS	للمعلقة الموادي الأحادي المام	• • • •	
CITY-ST-ZIP	•		2, 4 CITY-ST-ZIP	<u> </u>		
TITLE		☐ DELETE	3.1 TITLE		Change	☐ Addition l
NAME	·		3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS	·		:
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE	,	☐ DELETE	4.1 TITLE		Change	☐ Addition
NAME			4.2 NAME			
STREET ADORESS	·		4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP		Change	Addition
TITLE		C OF FTE			Change	
NAME		☐ DELETE	5.1 TITLE		•	
STREET ADDRESS	3	DELETE	5.2 NAME		•	٠
		☐ OELETE	5.2 NAME 5.3 STREET ADDRESS			
CITY-ST-ZIP			5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		. Change	•
TITLE		☐ DELETE	5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE		☐ Change	☐ Addition
			5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		☐ Change	•

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.

6.4 CITY-ST-ZIP

SIGNATURE: