


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

FILED

Apr 30 1997 8:00am  
Secretary of State

<b>PROFIT CORPORATION ANNUAL REPORT 1997</b>		 <b>FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS</b>	
<b>DOCUMENT # V23621 (8)</b>			
<b>1. Corporation Name INTERNATIONAL MONETARY FUND, INC.</b>			
<b>Principal Place of Business</b> 4001 COQUINA KEY DR ST PETERSBURG FL 33705 US		<b>Mailing Address</b> 4001 COQUINA KEY DR ST PETERSBURG FL 33705-4137 US	
<b>2. Principal Place of Business</b>		<b>2a. Mailing Address</b>	
<b>21</b> Suite, Apt. #, etc.	<b>26</b> Suite, Apt. #, etc.	<b>3. Date Incorporated or Qualified</b> 03/23/1992	
<b>22</b> City & State	<b>27</b> City & State	<b>3a. Date of Last Report</b> 07/11/1996	
<b>23</b> Zip	<b>28</b> Zip	<b>4. FEI Number</b> 59-3283287	
<b>24</b> Country	<b>29</b> Country	<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>9. Name and Address of Current Registered Agent</b> ENGLANDER, LEONARD S. 5959 CENTRAL AVE. SUITE 201 ST. PETERSBURG FL 33710		<b>10. Name and Address of New Registered Agent</b>	
<b>11.</b> 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.		<b>81</b> Name	
<b>SIGNATURE</b>		<b>82</b> Street Address (P.O. Box Number is Not Acceptable)	
<b>12. OFFICERS AND DIRECTORS</b>		<b>83</b>	
<b>12.1</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.2</b> <input type="checkbox"/> DELETE	<b>84</b> City	
<b>12.3</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.4</b> <input type="checkbox"/> DELETE	<b>85</b> Zip Code	
<b>12.5</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.6</b> <input type="checkbox"/> DELETE	<b>86</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.7</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.8</b> <input type="checkbox"/> DELETE	<b>87</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.9</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.10</b> <input type="checkbox"/> DELETE	<b>88</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.11</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.12</b> <input type="checkbox"/> DELETE	<b>89</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.13</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.14</b> <input type="checkbox"/> DELETE	<b>90</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.15</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.16</b> <input type="checkbox"/> DELETE	<b>91</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.17</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.18</b> <input type="checkbox"/> DELETE	<b>92</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.19</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.20</b> <input type="checkbox"/> DELETE	<b>93</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.21</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.22</b> <input type="checkbox"/> DELETE	<b>94</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.23</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.24</b> <input type="checkbox"/> DELETE	<b>95</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.25</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.26</b> <input type="checkbox"/> DELETE	<b>96</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.27</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.28</b> <input type="checkbox"/> DELETE	<b>97</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.29</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.30</b> <input type="checkbox"/> DELETE	<b>98</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.31</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.32</b> <input type="checkbox"/> DELETE	<b>99</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.33</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.34</b> <input type="checkbox"/> DELETE	<b>100</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.35</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.36</b> <input type="checkbox"/> DELETE	<b>101</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.37</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.38</b> <input type="checkbox"/> DELETE	<b>102</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.39</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.40</b> <input type="checkbox"/> DELETE	<b>103</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.41</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.42</b> <input type="checkbox"/> DELETE	<b>104</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.43</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.44</b> <input type="checkbox"/> DELETE	<b>105</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.45</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.46</b> <input type="checkbox"/> DELETE	<b>106</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.47</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.48</b> <input type="checkbox"/> DELETE	<b>107</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.49</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.50</b> <input type="checkbox"/> DELETE	<b>108</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.51</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.52</b> <input type="checkbox"/> DELETE	<b>109</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.53</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.54</b> <input type="checkbox"/> DELETE	<b>110</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.55</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.56</b> <input type="checkbox"/> DELETE	<b>111</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.57</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.58</b> <input type="checkbox"/> DELETE	<b>112</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.59</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.60</b> <input type="checkbox"/> DELETE	<b>113</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.61</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.62</b> <input type="checkbox"/> DELETE	<b>114</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.63</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.64</b> <input type="checkbox"/> DELETE	<b>115</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.65</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.66</b> <input type="checkbox"/> DELETE	<b>116</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.67</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.68</b> <input type="checkbox"/> DELETE	<b>117</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.69</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.70</b> <input type="checkbox"/> DELETE	<b>118</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.71</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.72</b> <input type="checkbox"/> DELETE	<b>119</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.73</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.74</b> <input type="checkbox"/> DELETE	<b>120</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.75</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.76</b> <input type="checkbox"/> DELETE	<b>121</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.77</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.78</b> <input type="checkbox"/> DELETE	<b>122</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.79</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.80</b> <input type="checkbox"/> DELETE	<b>123</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.81</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.82</b> <input type="checkbox"/> DELETE	<b>124</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.83</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.84</b> <input type="checkbox"/> DELETE	<b>125</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.85</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.86</b> <input type="checkbox"/> DELETE	<b>126</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.87</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.88</b> <input type="checkbox"/> DELETE	<b>127</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.89</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.90</b> <input type="checkbox"/> DELETE	<b>128</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.91</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.92</b> <input type="checkbox"/> DELETE	<b>129</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.93</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.94</b> <input type="checkbox"/> DELETE	<b>130</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.95</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.96</b> <input type="checkbox"/> DELETE	<b>131</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.97</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.98</b> <input type="checkbox"/> DELETE	<b>132</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>12.99</b> TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>12.100</b> <input type="checkbox"/> DELETE	<b>133</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12</b>	<b>13.1</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>13.2</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.3</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>13.4</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.5</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>13.6</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.7</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>13.8</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.9</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>13.10</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.11</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>13.12</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.13</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>13.14</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.15</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>13.16</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.17</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>13.18</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.19</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>13.20</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.21</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>13.22</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.23</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>13.24</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.25</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>13.26</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.27</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
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<b>13.30</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.31</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>13.32</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.33</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
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<b>13.36</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.37</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>13.38</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.39</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>13.40</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.41</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>13.42</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.43</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>13.44</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.45</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>13.46</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.47</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
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<b>13.68</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.69</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>13.70</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.71</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>13.72</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.73</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>13.74</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.75</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>13.76</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.77</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>13.78</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.79</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>13.80</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.81</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>13.82</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.83</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>13.84</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.85</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>13.86</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.87</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>13.88</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.89</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>13.90</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.91</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>13.92</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.93</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>13.94</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.95</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>13.96</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.97</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>13.98</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>13.99</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>13.100</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>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 on an attachment with an address.</b>		
<b>SIGNATURE:</b>	<b>4/26/97</b>		
<b>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</b>	<b>0374284</b>		

CR2E034 (9/96)