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

**PROFIT** CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P95000021474 (8)

INTERSONG INC.

STREET ADDRESS

STREET ADDRESS

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STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE

NAME

Sulte, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  City & State  City & State  Suite, Apt. #, etc.  5. Certificate of Status Desired  Fee Required  6. Election Campaign Financing Trust Fund Contribution  Added to Fees	Principal Place of Business Mailing Address 11820 N.E. 174TH STREET 11820 N.E. 174TH STREET NORTH MIAMI BEACH FL 33162 NORTH MIAMI BEACH FL 3									
21 26 Sulte, Apt. #, etc.  Sulte, Apt. #, etc.  Sulte, Apt. #, etc.  5. Certificate of Status Desired Fee Required  City & State  City & State  City & State  Country  Zip  Country  Zip  Country  Added to Fees  Zip  Country  8. This corporation has liability for intangible tax under s. 199.03  Florida Statutes Site No  9. Name and Address of Current Registered Agent  LOPEZ, ANTONIA M  11820 N.E. 174TH STREET  NORTH MIAMI BEACH FL 33162  84 City  FL 85 Zip Code  11. Pursuant to the provisions of Sections 607 0502 and 607 1508 Florida Statutes the above-named corporation submits this statement for the pursued of changing the provisions of Sections 607 0502 and 607 1508 Florida Statutes the above-named corporation submits this statement for the pursued of changing the provisions of Sections 607 0502 and 607 1508 Florida Statutes the above-named corporation submits this statement for the pursued changing the provisions of Sections 607 0502 and 607 1508 Florida Statutes the above-named corporation submits this statement for the pursue of changing the provisions of Sections 607 0502 and 607 1508 Florida Statutes the above-named corporation submits this statement for the pursue of changing the provisions of Sections 607 0502 and 607 1508 Florida Statutes the above-named corporation submits this statement for the pursue of changing the provisions of Sections 607 0502 and 607 1508 Florida Statutes the above-named corporation submits this statement for the pursue of changing the provisions of Sections 607 0502 and 607 1508 Florida Statutes the above-named corporation submits this statement for the pursue of changing the provisions of Sections 607 0502 and 607 1508 Florida Statutes the above-named corporation submits the provisions of Sections 607 0502 and 607 1508 Florida Statutes the above-named corporation submits the provisions of Sections 607 0502 and 607 1508 Florida Statutes the above-named corporation submits the provisions of Sections 607 0502 and 607 1508 Florida Statutes the above-named corporation submits the s								1		eport
27   5. Certificate of Status Desired   Fee Required	21		26					·=	<u> </u>	oplied For ot Applicable
28    Zip   Country   Zip   Country   S. This corporation has liability for intangible tax under s. 199.03   Florida Statutes   Yes   No	22		27				5. Certificate of Status Desired			
25 29 30 Florida Statutes Yes No  9. Name and Address of Current Registered Agent  LOPEZ, ANTONIA M  11820 N.E. 174TH STREET  NORTH MIAMI BEACH FL 33162  81 Name  82 Street Address (P.O. Box Number is Not Acceptable)  83 84 City FL 85 Zip Code	23		28							
LOPEZ, ANTONIA M 11820 N.E. 174TH STREET NORTH MIAMI BEACH FL 33162  81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83  84 City  FL 85 Zip Code  11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above pamed corroration submits this statement for the purpose of shapping its register.		25	29	<b>⊢</b> :	untry					
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above named corroration submits this statement for the purpose of changing its register.	NOF	RTH MIAMI BEACH FL 33162		:	83		daress (1.0). Box Normber is Not Acceptal		<b>85</b> Zip (	Code
SIGNATURE	office or r agent. I a	to the provisions of Sections 607 registered agent, or both, in the S im familiar with, and accept the o	.0502 and 607.1508, Florida Sla state of Florida Such change wa bligations of, Section 607.0505,	itutes, the a as authorize Florida Sta	above ed by atutes	e-named c / the corpo s.	orporation submits this statement for the paration's board of directors. I hereby accept	TILLIDORO (	of changing it	s registered registered
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstalarg) DATE		<del></del>				ent signature re	<u> </u>			
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		OFFICERS AND DIRECTORS  DELETE					ADDITIONS/CHANGES TO OFFIC	CERS AN		
LARPE (ANN)			•		1.1 UILE 1.2 NAME				L Change	Addition
STREET ADDRESS 11820 N.E. 174TH STREET 1.3 STREET ADDRESS		11820 N.E. 174TH STREET			1.3 STREFT ADDRESS					
CITY-ST-ZIP NORTH MIAMI BEACH FL 33182 14 CITY-ST-ZIP	CITY-ST-ZIP		H MIAMI BEACH FL 33162		1.4 CITY - ST - ZIP					
	TITLE	1			2.1 TITLE				Change	Addition
		LOPEZ, ANTONIA		2.2 N	2.2 NAME					
MARTINIAN PRANTE PARAMETER	- F	MARTINE DELOILE ALLA			23 STREET ADDRESS					
									1 0	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
TITLE DELETE 3.1 TITLE Change Add			☐ DETER			ļ			L.J Unange	

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.

33 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

4.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

4.CHILE

4. 2 NAME

5 1 1016

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

SIGNATURE: AUTOWNAIDEN

4.91-1991 (200) 911100h

Change

Change

Addition

☐ Addition

Addition

**FILED** 

May 16 1997 8:00am

Secretary of State