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PROFIT CORPORATION **ANNUAL REPORT** 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jun 19 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 506101

(5)

IVORY INTERNATIONAL, INC.

Principal Place of Business Mailing Address								
15400 N.W. 34TH AVENUE MIAMI FL 33054-2480		15400 N.W. 34TH AVENUE Miami Fl 33054-2461						
					3. Date Incorporated or Qualified 06/29/1976	3a. Date of I		
2. Principal Place of Business		2a. Mailing Address	2a, Mailing Address		4. FEI Number	Applied For		
21		26			59-1679855	59-1679855 Not Applie		
Suite, Apt. #, etc.		27	Suite, Apt. #, etc.			1 1 7 -	.75 Additional ee Required	
City & 23	State	City & State			Election Campaign Financing Trust Fund Contribution		5.00 May Be dded to Fees	
Zip 24	Country 25	29 30	Countr	у		Yes No		
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New Registered Agent			
8	LESTER, PAUL, ESQ. 200 S. BISCAYNE BLVD.		81		ess (P.O. Box Number is Not Acceptab	ile)		
STE. 2100 MIAMI FL 33131			83	3				
			84	,		FL 85	Zip Code	
11. Pursu office	uant to the provisions of Spotions 607.05 or registered agont, or both, in the Sta	502 and 607.1508, Florida Statutes, the te of Florida, Such change was author	abov ized b	re-named corp y the corporati	oration submits this statement for the proofs board of directors. I hereby accep	urpose of chang of the appointment	ging its registered ent as registered	

lered ered

. agent. La	am tamiliar with, and accept the obligations	of, Section 607.0505, Flo	orida Statutes.		_	
SIGNATURE	Signature, typed or printed name of registered agent and of	te it applicable . (NOT	E-Registered Agent signature requi	ired when reinstating) DATI		
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PVPD	☐ DELETE	1.1 70LE	Change	Addition	
NAME	LODGE, ROBERT J		1.2 NAME			
STREET ADDRESS	1218 NE 95TH ST		1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI SHORES FL 33138		1.4 CITY- ST- ZIP			
TITLE	SD	DELETE	2.1 TITLE	Change	☐ Addition	
NAME	LODGE, JOSEPH 1.J.		2.2 NAME			
STREET ADDRESS	390 NE 102 ST.		23 STREET ADDRESS			
CITY-ST-ZIP	MIAMI SHORES FL 33138		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		DELFTE	4.1 TITLE	Change	Addition	
NAME			4. 2 NAME			
STREET ADORESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY - ST - ZIP			
TITLE		☐ DELETE	5.1 TITLE	Change	Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP	L		5.4 CITY-S1-ZIP			
TITLE	11	☐ DELEY!	6.1 TITLE	☐ Change	Addition	
NAME	//		6.2 NAME			
STREET ADDRESS	11	- 11	6.3 STREET ADDRESS			
OUT ! OT 310	1 1 1	, II				

14. I do hereby certify that the information supplied information indicated on this annual report or I am an officer or director of the corporation of appears in Block 12 or Block 13 if changed, or ualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the is true and accurate and that my signature shall have the same legal effect as if made under oath; that powered to execute this report as required by Chapter 607, Florida Statutes; and that my name