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

**PROFIT CORPORATION ANNUAL REPORT** 1998 DOCUMENT #

FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

INTERNATIONAL DESIGNS, INC.

(9)

## **FILED** Apr 23 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						~	· <b>uf</b> pji ofoli bio:	il worde wi	IEI1 FOE1		
2988 GRIFFIN RD. FT. LAUDERDALE FL 33312		2988 GRIFFIN RD. FT. LAUDERDALE FL 33312				DO NOT WRITE IN T	HIS SPACE				
÷ .	•					3. Date Incorporated or Qualified 01/01/1977			•		
2. Principal Place of Business		2a. Mailing Address				4. FEI Number		Appli	ied For	]	
21		26			<del></del>	59-1713293					
Suite, Apt. #, etc.		Suite, Apt. #, etc. 27	27			5. Certificate of Status Desired	·	\$8.75 Additional Fee Required			
City & State		City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
Zip				untry  8. This corporation owes or has paid the current year Intangible					-		
24	25 29 30 9. Name and Address of Current Registered Agent			Personal Property Tax due June 30. 📓 Yes 🗌 No						_	
		t Hegistered Agent		81	Name	10. Name and Address of New Registe	rea Agent			4	
	ORSTEIN, RAYMOND W.										
	8 <b>G</b> riffin RD. Lauderdale FL 33312					ess (P.O. Box Number is Not Acceptable)					
				83							
				84	City	·	FL 85	Zip Co	de	1	
office or re	o the provisions of Sections 607.0502 egistered agent, or both, in the State in femiliar with, and accept the obliga	of Florida. Such change was	authorized	d by	the corporation	oration submits this statement for the purpo on's board of directors. I hereby accept the	se of changi appointmen	ng its r	egistered gistered		
SIGNATURE .	<u> </u>										
12.	it and title if applicable (NO DIRECTORS	(NOTE: Registered Agent signatu			ADDITIONS/CHANGES TO OFFICERS		TORS	IN 12			
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NAME	BOORSTEIN, RAYMOND W		1.2 N							3	
STREET ADDRESS	2988 GRIFFIN RD.		138		T ADDRESS					18	
CITY-ST-ZIP	FT. FAUDERDALE FL	1.4 (		I CITY-ST-ZIP						18	
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NAME		•	6.2 NA								
STREET ADDRESS					ADDRESS						
CITY-ST-ZIP			6.4 CITY - ST - ZIP								
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I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatio 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