

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathew
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

DOCUMENT # 591174 (8)

1. Corporation Name

INTERNATIONAL SYSTEMS & SUPPLIES, INC.

95 APR 21 PM 4:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

~~4000 HOLLYWOOD BLVD~~
~~GTE 7104~~
~~HOLLYWOOD FL 33021~~
~~US~~

~~4000 HOLLYWOOD BLVD~~
~~STE 7104~~
~~HOLLYWOOD FL 33021~~
~~US~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/25/1978

3a. Date of Last Report

04/19/1994

2. Principal Place of Business

2a. Mailing Address

21 2455 HOLLYWOOD BLVD

26 2455 HOLLYWOOD BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 *102

27 *102

City & State

City & State

23 HOLLYWOOD, FL

28 HOLLYWOOD, FL

Zip

Country

Zip

Country

24 33020

25 USA

29 33020

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BEYER, GERALD
2101 W. COMMERCIAL BLVD.
FT. LAUDERDALE, FL. TLL 33309

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-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.

SIGNATURE

Signature typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
D
ROBERTSON, PAULINE
5488 DUNDAS ST. W.
ISLINGTON, ONT. CAN.

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY ST ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
PD
REID, RONALD
2115 N 44 AVE
HOLLYWOOD FL

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY ST ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
VD
MANTELL, ELIHU
1114 RUSSELL DR
HIGHLAND BCH, FL 00000

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY ST ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
STD
REID, DONNA
2115 N 44 AVE
HOLLYWOOD FL

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY ST ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY ST ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY ST ZIP
☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(4)(b), 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.

SIGNATURE:

Gerald Reid
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

07/18/95 (305) 924-9222