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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # 626401

(4)

INTERNATIONAL	PROJECT DEVELOPMENT	CODDODATION
INTERNATIONAL	PROJECT DEVELOPMENT	LURPUHATIUN

Principal Place of Business Mailing Address			I FOULTS DITTO FROM OFFICE OBTAIN	- I NORING DINIO SKOLD OSKIT DIBIL ODIGI SIDI DIRLI SEBIL DIBIL DIDII BLOK DIBIL DIBL		
8462 S TAMIAMI TRAIL P.O. BOX 2700 SARASOTA FL 34238 US		PO BOX 2700 P.O. BOX 2700 SARASOTA FL 34230 US				
				3. Date Incorporated or Qualified 06/18/1979	3a. Date of Last Report 04/11/1995	
	ace of Business	2a. Mailing Address	.,		4. FEI Number	Applied For
21	1 - 3 -	26			59-2367183	Not Applicable
Suite, Apt #	·	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	Y	City & State			Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees
Zij.)	Country	7 ₁ p	Country 30		This corporation has liability for in Florida Statutes	ntangible tax under s 199.032,
24	25 9. Name and Address of Current		1301		10. Name and Address of New Re	
	Marilli i Alikai ili im ma mi mana e		81	Name		•
	ERG, ALEXANDER		82	Street A	ddress (P.O. Box Number is Not Acceptabl	le)
	royal flamingo dr. Ota fl 33577		83			
******	FIII 10 474.1		84	City		85 Zip Code
			64	City		FL 85 Zip Code
or registere	to the provisions of Sections 607.0502 and agent, or both, in the State of Florida th, and accept the obligations of, Section	 a. Such change was authorized 	zed by the corp	named cor oration's b	rporation submits this statement for the purp soard of directors. I hereby accept the appo	pose of changing its registered office pintment as registered agent. I am
SIGNATURE .	Signature, typed or profest name of registered agent a	and fateral appointables (Ne	OTz: Rogistered Age	it signature rec	Quired when reinstating.	DATE
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI	
Triuf	PT	DELETE	1. 1 TITLE			☐ Change ☐ Addition
NAME	WINEBERG, ALEXANDER		1.2 NAME			
STHEFT ADDRESS	482 E ROYAL FLAMINGO DR		1.3 STREET	ADDRESS		
O(1Y S1-7IP	SARASOTA, FL 00000 VP	□ DELETE	1.4 CITY - S	T - 21P		☐ Change ☐ Addition
TillE	WEINBERG, ANITA	DELETE	2 1 TH LE 2 2 NAME			☐ Change ☐ Addition
NAME STREET ADDRESS	482 E ROYAL FLAMINGO DR		2 3 STREET	ADDRESS		
(i.i.k. 8.1-3/5	SARASOTA, FL 00000		2 4 CITY-S			
Tallet	\$	DELETE	3 1 THILE	1		Change Addition
NAME	HARKWAY, MARTIN		3.2 NAME			
STREET ADDRESS	219 S ORANGE AVE		3.3 STREE	I ADDRESS		
C 17 ST-7+	SARASOTA, FL 00000		3.4 CITY - S	I - ZIP		F-1 (1)
T 11f		DETETE	4 1 TITLE			Change Addition
NAM:			4 2 NAME	:c-ppcco		
STREET ACCORESS			4.3 STREET			
OFF STATE	· · · · · · · · · · · · · · · · · ·	DELETE	4.4 CITY - S 5 1 TITLE	1 - 215		Change Addition
N4Mi		_	5 2 NAME			<u> </u>
STREET ADDRESS			5 3 STREET	ADDRESS		
Clr SI-7P			5 4 CITY - S	ir - zije		
THE		DELETE	6 1 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			63 STREET	ADDRESS		
CHY SE-ZIO	L		6 4 CITY - 9			0710/11/5
certify that eath; that	f the information indicated on this annua	nt report or supplemental and ation or the receiver or truste	nual report is tru ee empowered	ue and acc	ify for the exemption stated in Section 119.0 curate and that my signature shall have the bithis report as required by Chapter 607, Fic	same legal effect as if made under

SIGNATURE: Mes aun feur Heich and ALEVANDER WEINBORG 3/11/96 (94) 951-0585
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Designed Proposition

CR2E034 (12/95)