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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 667378

(4)

INVESTMENT INDUSTRIES OF FLORIDA, INC.

Principal Place of Business

Mailing Address

5601 WINDHOVER DRIVE ORLANDO FL 32819 5601 WINDHOVER DRIVE ORLANDO FL 32819-7914

FILED May 13 1997 8:00am Secretary of State



0/10/1/00			,			Į.				
						3. Date Incorporated or Qualified	3a. Date o	Last R	eport	
						04/21/1980	05/01/1	1996		
2. Principa	CSS			4. FEI Number		T	plied For			
21	26					59-2024476		No	t Applicable	
Sulte, A	pt. #, otc.	Suite, Apt. #,	Suite, Apt. #, etc.				5	8.75 /	Additional	
22		27	27			5. Certificate of Status Desired	اسا .	Fee Re		
City & S	State	City & State				6. Election Campaign Financing	5	5.00	May Be	
23	28			. , , , , , , , , , , , , , , , , , , ,		Trust Fund Contribution		Added t		
Zip	Country	Zip	Co	Country		8. This corporation has liability for i	ntangible tax	under s.	199.032	
24	25	29	30			Florida Statutes	Yes 💢 N	9		
	9. Name and Address of Curre	ent Registered Agent		ļ,		10. Name and Address of New Re	gistered Ager	nt		
MARDER MICHAEL					81 Name					
100 W CYPRESS CREEK DR STE 700					82 Street Address (P.O. Box Number is Not Acceptable)					
FT LAUDERDALE FL 33309					Silver Approved in S. Box Hambler is Not Notice planting					
•				В3						
								77-5		
				84	City		FL 85	Zip (Code	
11. Pursua	ant to the provisions of Sections 607.00	502 and 607.1508, Florid	oa Statutes, the a	L I-	-named co	orporation submits this statement for the p	urnose of cha	nging it:	s registered	
office of	or registered agent, or both, in the Stat It am familiar with, and accept the obli	te of Florida. Such chan	ige was authorize	ed by	the corpor	ration's board of directors. I hereby accep	it the appointr	nent as	registered	
_	·	iganons or, acciron cor.	.0303, Florida Sta	nencis					\ \	
SIGNATUR	Signature, typed or printed name of registers dia	agent and title if applicable.	(NOTL Bag store	ed Age	nt signature red	quired when reinstating)	DATE			
12.	OFFICERS A	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND DIF	ECTOR	S IN 12	
TITLE	PD	DE	LETE 1.11	IIILE				Change	Addition	
NAME	SIEGEL, DAVID		121	MAME	ļ				ļ	
STREET ADDRE			138	STREET	ADDRESS				ì	
CITY-ST-ZIP	ORLANDO FL			1.4 CiTY+ST+ZIP						
TITLE	STD	[] [)8						Change	Addition	
NAME	SIEGEL, BETTIE	-	2. 2 N	NAME				-		
STREET ADDRE			I		ADDRESS					
CITY-ST-ZIP	ORLANDO FL			CHY-S	\ \				}	
TITLE	UNDANDO FL				11-211			Change	Addition	
NAME		٠. س	3.2 N						enad record	
	re				ADDIDECE				i	
STREET ADDRE	55				ADDRESS					
CITY-ST-ZIP				CITY-S	1 - ZIP			Change	Addition	
		ال لــا			-		لہا	оналус	Muniting 1	
NAME				NAME						
STREET ADDRE	SS				ADDRESS					
CITY-ST-ZIP				CHY-SI	1 - ZIF			01.		
TITLE		DE					L.J	Change	Addition	
NAME			5.2 N							
STREET ADDRE	ss		5.3 \$	STREET.	ADDRESS					
CITY-ST-ZIP				011Y-S1	1 - ZIP					
TITLE			LETE 617	met				Change	Addition	
NAME			6.2 N	JMAN	i					
STREET ADORE	ss		635	STREET.	ADDRESS				Ì	
CITY-ST-ZIP			640	UIIY-\$1	1 - 7IP					

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 eath; that I am an officer or director of this certificities of the receiver of indice 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 as attackment with an address.

CICNIATUDE.

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4/25/97