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03-05-1999 90041 004 ***150.00

PROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F07124**

1. Corporation Name
INTERBOND CORPORATION OF AMERICA

Principal Place of Business	Mailing Address
3450 NW 112 ST. MIAMI FL 33167 US	3450 NW 112 ST. MIAMI FL 33167 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 3400 SW 4th ST	2a. Mailing Address 26 3400 SW 4th ST
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Hollywood FL	City & State 28 Hollywood FL
Zip / Country 24 33314 25 US	Zip / Country 29 33314 30 US

3. Date Incorporated or Qualifed: 11/26/1980
4. FEI Number: 59-2105736 ☐ Applied For ☐ Not Applicable
5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. *This corporation owes the current year Intangible* Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
YOUNG, PAUL ~~1630 N. FEDERAL HWY.~~ ~~FT. LAUDERDALE FL 33305~~	81 Name 82 Street Address (P.O. Box Number is Not Acceptable): ONE EAST BROWARD BLVD 83 84 City: FT LAUDERDALE FL 85 Zip Code: 33301

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	PERLMAN, ROBERT		1.2 NAME		
STREET ADDRESS	~~3450 NW 112 STREET~~		1.3 STREET ADDRESS	3400 SW 4th ST	
CITY-ST-ZIP	~~MIAMI FL 33167~~		1.4 CITY-ST-ZIP	Hollywood, FL 33314	
TITLE	PD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	PERLMAN, MICHAEL		2.2 NAME		
STREET ADDRESS	~~3450 NW 112 ST.~~		2.3 STREET ADDRESS	3400 SW 4th ST	
CITY-ST-ZIP	~~MIAMI FL 33167~~		2.4 CITY-ST-ZIP	Hollywood, FL 33314	
TITLE	SD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	PERLMAN, SHARON		3.2 NAME		
STREET ADDRESS	~~3450 NW 112 ST.~~		3.3 STREET ADDRESS	3400 SW 4th ST	
CITY-ST-ZIP	~~MIAMI FL 33167~~		3.4 CITY-ST-ZIP	Hollywood, FL 33314	
TITLE	TAS	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	LADAU, JEROME		4.2 NAME		
STREET ADDRESS	~~3450 NW 112 ST.~~		4.3 STREET ADDRESS	3400 SW 4th ST	
CITY-ST-ZIP	~~MIAMI FL 33167~~		4.4 CITY-ST-ZIP	Hollywood, FL 33314	
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	PERLMAN, BRUCE		5.2 NAME		
STREET ADDRESS	~~3450 NW 112 ST.~~		5.3 STREET ADDRESS	3400 SW 4th ST	
CITY-ST-ZIP	~~MIAMI FL 33167~~		5.4 CITY-ST-ZIP	Hollywood, FL 33314	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (11/98)

14. I 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 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, with all other like empowered.

SIGNATURE: _____ 1/19/99 954 797 4000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #