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

PROFIT CORPORATION ANNUAL REPORT

1997



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9600005810 (4)

ISS ACTION, INC.

FILED Mar 19 1997 8:00am Secretary of State



Principal Place of Business Mailing Address J.F.K. INTERNATIONAL AIRPORT J.F.K. INTERNATIONAL AIRPORT				I TERNIDA NITA TAND BINIL BRINL BRINL BRINL BRINL BRINL BRINCH BRINCH FINDS NITAS BRINL BRINL LORY		
			ORT			
HANGAR 9 JAMAICA NY 11430		HANGAR 9 JAMAICA NY 11430				
• • • • • • • • • • • • • • • • • • •	7400			3. Date Incorporated or Qualified	3a. Date of Last Report	
		.,,		11/07/1996		
	lace of Business	2a. Mailing Address	۸ .	4. FEI Number	Applied For	
Suite, Apt.	INTERNATIONAL ARAN	* 26 3 K IN **C. *********************************	unal Hipport	11-3075292	Not Applicable	
22 B LD6	· _	27 BIDG 80		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stat		City & Stato		6. Election Campaign Financing	\$5.00 May Be	
23 JAN	AAICA MY	28 JAMAICA	~~	Trust Fund Contribution	Added to Fees	
7in	Country	Zip	Country	8. This corporation has liability for in	itangible tax under s. 199.032,	
24 114.			30 USA		Yes No	
	9. Name and Address of Current		DS Nome	10. Name and Address of New Reg	Istered Agent	
DADE COUNTY CORPORATE AGENTS, INC. 81 Name						
AVENTURA FL 33180			82 Street Add	ddress (P.O. Box Number is Not Acceptable)		
			83			
					i	
			84 City		FL 85 Zip Code	
11. Pursuant	to the provisions of Spections 607 0502	and 607 1508. Florida Statutos	s the above-parned core	poration submits this statement for the pu		
office or r	registered agent, or both, in the State of	of Florida. Such change was au	ithorized by the corporal	tion's board of directors. I hereby accept	the appointment as registered	
, ,	m familiar with, and accept the obliga	nans or, Section 607.0505, Flori	ida Statutes.		ł	
SIGNATURE	Signature, lyped or printed name of registered agen-	t and title if applicable (NOT)	Registered Agent's gnature requ	red when reinstating)	DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICE	(
TITLE	PD	LJ DELFTE	1.1 THE		Change Addition	
NAME	DAPHNA, YEHUDA		1.2 NAME		[3	
STREET ADDRESS	743 WEST BROADWAY		1.3 STREET ADDRESS		Į į	
CITY-ST-ZIP	WOODMERE NY 11598	FYLE Y	1.4 CITY - ST - ZiP			
TITLE	V CAROWOVI TUOMAC	☐ DETETE	211016		Change Addition	
NAME	CAPOWSKI, THOMAS		2.2 NAME			
STREET ADDRESS	241 BERRY HILL ROAD SYOSSET NY 11791		2.3 STREET ADDRESS		1	
CITY-ST-ZIP TITLE	DST	DELETE	2. 4 CHY- ST-7IP 3.1 THUE	pro	Change Addition	
NAME	NEWMAN, PAMELA	L. Ween	3.2 NAME		E change E house.	
STREET ADDRESS	743 WEST BROADWAY		3 3 STREET ADDRESS			
CITY-ST-ZIP	WOODMERE NY 11598		3.4. C(1) Y - S1 - 7)P			
TITLE		DELETE	4.1 TILE		Change Addition	
NAME			4 2 NAM(
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-7/P			
TITLE		DELETE	5.1 NILE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY+ (1 - 7/P			
TITLE		☐ DELETË	6 1 1 II LE		Change Addition	
NAME			6.2 NAM.			
STREET ADDRESS			6.3 STREE ADDRESS			
CITY-ST-ZIP	and contifue that the inference in	Transfer Mala Addition of a second of the second of	6.4 City- ZiP	dio Pootion 110 07/09/3 Floride Contract	Lighting position that the	
14. do herel	by certify that the information supplied	with this ming does not qualify	for the examption stated	d in Section 119.07(3)(i), Florida Statutes	i ruriner certify that the	

I am an officer or director of the corporation of the receiver or frustee empowered to ex appears in Block 12 or Block 13 if changed, or on the attachment with an address.

ate and that my signature shalt have the same legal effect as if made under eath; tha te this report as required by Chapter 607, Florida Statutes; and that my name