

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
May 06, 1999 8:00 am
Secretary of State

05-06-1999 90110 002 ***150.00

DOCUMENT # F98000000308

1. Corporation Name
ISS MALL SERVICES, INC.

Principal Place of Business
TWO CONCOURSE PKWY
ATLANTA GA 30328

Mailing Address
TWO CONCOURSE PKWY
ATLANTA GA 30328

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
01/06/1998 (FL)

4. FEI Number
58-2326984

Applied For
Not Applicable

\$8.75 Additional
Fee Required

\$5.00 May Be
Added to Fees

5. Certificate of Status Desired ☐

6. Election Campaign Financing
Trust Fund Contribution ☐

8. This corporation owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business
21 1600 PARKWOOD CIRCLE

2a. Mailing Address
26 C/O BAI MGT. SERVICES, INC.

Suite, Apt. #, etc.
22 SUITE 400

Suite, Apt. #, etc.
27 4800 N. FEDERAL HWY #200B

City & State
23 ATLANTA GA

City & State
28 BOCA RATON FL

Zip Country
24 30339 25 USA

Zip Country
29 33431 30 USA

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

10. Name and Address of New Registered Agent

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☒ DELETE
NAME CURRY, RICHARD
STREET ADDRESS TWO CONCOURSE PKWY
CITY-ST-ZIP ATLANTA GA

TITLE VD ☒ DELETE
NAME O'HALLORAN, MARTIN
STREET ADDRESS TWO CONCOURSE PKWY
CITY-ST-ZIP ATLANTA GA

TITLE S ☒ DELETE
NAME MALLORY, DAVID L
STREET ADDRESS TWO CONCOURSE PKWY
CITY-ST-ZIP ATLANTA GA

TITLE T ☐ DELETE
NAME WILLIAMS, GEORGE A
STREET ADDRESS TWO CONCOURSE PKWY
CITY-ST-ZIP ATLANTA GA

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE RAYMOND GROSS ☐ Change ☒ Addition
1.2 NAME PRESIDENT
1.3 STREET ADDRESS 1600 PARKWOOD CIRCLE #400
1.4 CITY-ST-ZIP ATLANTA GA 30339

2.1 TITLE VS ☐ Change ☒ Addition
2.2 NAME STEVEN LEVINE
2.3 STREET ADDRESS 4800 N. FEDERAL HIGHWAY, #200B
2.4 CITY-ST-ZIP BOCA RATON FL 33431

3.1 TITLE T ☐ Change ☒ Addition
3.2 NAME ANN OLBERT
3.3 STREET ADDRESS 4800 N. FEDERAL HIGHWAY, #200B
3.4 CITY-ST-ZIP BOCA RATON FL 33431

4.1 TITLE V ☒ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS 1600 PARKWOOD CIRCLE #400
4.4 CITY-ST-ZIP ATLANTA GA 30339

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

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

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5/1/99 (561) 361-4908

CR2E034 (11/98)