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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 18 1997 8:00am

JNNA	RPORATION JAL REPORT 1997		Secreta	Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		Secretary of State		
1. Corporand			(7)					
INTER-S	tate properti	ES, INC.						
Principal Place of Business Mailing Address						BARNY DYDNY BARNY BARNY BA	EN DIDN 1881	
1915 AIRPORT MELBOURNE F US		1915 ( MELB US	1915 AIRPORT BOULEVARD MELBOURNE FL 32901-4322 US					
						3. Date Incorporated or Qualified 02/18/1985	3a. Date of Las 03/07/1996	
·	Place of Business	2a. № 26	lailing Address			4, FEI Number 59-2554106	<del></del>	Applied For Not Applicable
21] Suite, Apt 22	#, etc.		uite, Apt. #, etc.			5. Certificate of Status Desired	\$8.7	5 Additional Required
City & Stat	le	} <del></del> ,	ity & State			6. Election Campaign Financing		May Be
<b>23</b> Zip	Cour	ntry Z8	ıp	Countr	у	Trust Fund Contribution  8. This corporation has liability for		r s. 199.032,
24	25	25 29 30 ame and Address of Current Registered Agent		30	·	Florida Statutes XYes No		
tier	HER, MICHAEL A.	tess of Chiletit Hedister	ea Agent	8.	Name	10. Name and Address of New Re	Bisteleo Ağalır	
	S AIRPORT BLVD			6:	Street Ade	dress (P.O. Box Number is Not Accepta	bla)	
	BOURNE FL 32901			Ĺ		resa (r.o. box (vurioe) is (voi Acceptal		
				8:	3			
				84	City		FL 85 Z	ip Code
11. Pursuant office or i agent. La	to the provisions of Sc registered agent, or bo am familiar with, and ac	ections 607,0502 and 607 ith, in the State of Fiorida. coept the obligations of S	.1508, Florida Statut Such change was section 607.0505, Fl	es, the abor authorized to orida Statute	ve-named cor by the corpora es.	poration submits this statement for the lation's board of directors. I hereby acce	· ·	g its registered as registered
SIGNATURE.	with motion of motions and						D. V.C.	
12.		orciol registered agent and little if a OFFICERS AND DIRECTO		13.	deur eiduarnie iedi	ired when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE CERS AND DIRECT	ORS IN 12
Mil	PSD		DELETE	1.1 TITLE	T		☐ Chang	e 🔲 Addition
NAME	FISCHER, MICHAI 200 ORLANDO BL			1.2 NAME	•			{
STREET ADDRESS CITY ST-ZIP	INDIALANTIC FL	- <b>4</b> 0		1.3 SIRE	ST-7IP			
Tr'tt			DELETE	2.1 TITLE	-		Chang	e Addition
NAME	{			2.2 NAME	1			Ì
STREET ADDRESS	{	•		1	T ADDRESS			}
TITLE			DELETE	2.4 CITY 3.1 TITLE	-SI-ZIP	· · · · · · · · · · · · · · · · · · ·	Chang	je Addition
NAME				3.2 NAME			•	
STREET ADORESS				3.3 STREE	T ADDRESS			. ]
CHY-S1-ZIP			DELETE	3 4. CITY	<del></del>	· ·	Chang	e Addition
NAME			btttle	4.1 TITLE 4.2 NAM	l.		[] Criding	k [ ] Youllion
STREET ADDRESS	}				T ADDRESS			1
CITY ST-ZP				4.4 CITY -	ST-ZIP			
TiTLE	{		DELETE	5.1 TITLE	Ì		☐ Chang	e 🔲 Addition
NAME CIDSLEANSONCE	{			5.2 NAME				
STREET ADDRESS	}			5.8 STREE	T ADDRESS ST. 7IP			
TILE	·		DELETE	61 TITLE			☐ Chang	e Addition
NAME				6.2 NAME				
STREET ADDRESS				6.3 STREE	T ADDRESS			l

6.4 city-St-ZiP

14. 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 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.

SIGNATURE: