Apr 02, 1999 8:00 am Secretary of State

04-02-1999 90039 030 \*\*\*150.00

## 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

## **DOCUMENT # H44413**

1. Corporation Name

| INTERNATIONAL BUSINESS EQUIPMENT, INC.             |  |                                       |                    |   | LIEBKAN ANK AKAN BIRK AKAN MARA MARA MIKA AKAN   | <b>81611 81811 81811 8</b> 1 | D12                    |
|--|--|---------------------------------------|--------------------|---|--|------------------------------|------------------------|
|  |  |                                       |                    |   |  |                              |                        |
| Principal Place of Business Mailing Address        |  |                                       |                    |   | I (BEIMI) BINI BINI BINI BINDI IFOND IIEI BIDII  | BYBYL BYBYL BYBYL BY         | <b>811 01011 180</b> 1 |
| 12812 SW 122ND AVE 12812 SW 122ND AVE              |  |                                       |                    |   |  |                              |                        |
| P.O. BOX 521408 P.O. BOX 521408                    |  |                                       |                    |   | DO NOT WRITE IN THIS SPACE   |                              |                        |
| MIAMI FL 33186 MIAMI FL 33186                      |  |                                       |                    |   | 3. Date Incorporated or Qualifed   |                              |                        |
|  |  | <u> </u>                              |                    |   | 02/26/1985   |                              | <b></b>                |
| Principal Place of Business     2a. Mailing Addres |  |                                       |                    |   | 4. FEI Number  |                              | olied For              |
| 21   |  | 26                                    |                    | 59-2509445  |  | Applicable                   |                        |
| Suite, Apt.  | #, etc.  | Suite, Apt. #, etc.                   |                    |   | ======================================   | \$8.75 A                     |                        |
| 22   |  | 27                                    |                    |   |  |                              | ·                      |
| City & State                                       | е  | City & State                          |                    |   | 6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees                        |                              |                        |
| 23   | Country  | Zip Country                           |                    |   | 8. This corporation owes the current year Intangible   |                              |                        |
| Zip  | Country  |                                       | _                  | y   | Personal Property Tax.   |                              | □No                    |
| 24   | 25 29 30 30 9 Name and Address of Current Registered Agent                       |                                       |                    | 10. Name and Address of New Registered Agent          |  |                              |                        |
|  | g. Name and Address of Curren  | it Kadistaida vigani                  | 8                  | 1 Name  |  | <del>-</del>                 |                        |
| STEF   | PHEN, JOE  |                                       |                    |   | 100 0 Note that is Not Associated by   |                              |                        |
| 9601   | W CALUSA CLUB DR   | ·                                     |                    | 82 Street Address (P.O. Box Number is Not Acceptable) |  |                              |                        |
| MIAMI FL 33186                                     |  |                                       | 83                 | 3   |  |                              |                        |
|  |  |                                       |                    |   |  |                              |                        |
| <u>.</u>   |  |                                       | 84                 | 4 City  | , <b>F</b>   | <b>L</b> 85 Zip C            | ode                    |
| 11 Pursuant  | to the provisions of Sections 607.050  | 02 and 607.1508, Florida Statutes     | , the abov         | ve-named  | corporation submits this statement for the purpose oration's board of directors. I hereby accept the app | of changing its              | registered             |
| office or n  | egistered agent, or both, in the State<br>m familiar with, and accept the obliga | of Florida. Such change was aut       | horized by         | y the corpo   | oration's board of directors. I hereby accept the app  | ointment as reg              | gistered               |
|  | m lamiliai with, and accept the conga  | Along of, Codion Corrector, Franc     | o otatalo          | 0.  |  |                              |                        |
| SIGNATURE  | Signature, typed or printed name of registered age                               | ent and title if applicable. (NOTE: R | egistered Ag       | ent signature r                                       | required when reinstating) DATE  |                              |                        |
| 12.  | OFFICERS AN  | ND DIRECTORS                          | 13.                |   | ADDITIONS/CHANGES TO OFFICERS  |                              |                        |
| TITLE  | DP 1   | ☐ DELETE                              | 1.1 TITLE          |   |  | Change                       | Addition               |
| NAME   | Stephen, Joseph C.   |                                       | 1.2 NAME           |   |  |                              |                        |
| STREET ADDRESS                                     | 9601 W CALUSA CLUB DR  |                                       | 1.3 STREI          | ET ADDRESS  |  |                              |                        |
| CITY-ST-ZIP  | MIAMI FL   |                                       | 1.4 CITY-          | ST-ZIP  |  |                              |                        |
| TITLE  | ST ·   | ☐ DELETE                              | 2.1 TITLE          |   | SECRETARY  | <b>∑</b> AChange             | ☐ Addition             |
| NAME   | DIPANKAR, BANERJEE   |                                       | 2.2 NAME           |   | BANERJEE, DIPANKAR   |                              | İ                      |
| STREET ADDRESS                                     | 7314 SW 148TH CT_  |                                       | 2.3 STRE           | ET ADDRESS  | 7314 SW 148 CT.  |                              | [                      |
| CITY-ST-ZIP  | MIAMI FL 33193   |                                       | 2.4 CITY-ST-ZIP    |   | MIAMI, FLORIDA 33193   |                              |                        |
| TITLE  |  | ☐ DELETE                              | 3.1 TITLE          |   | TREASURER  | Change                       |                        |
| NAME   |  |                                       | 3.2 NAME           |   | STEPHEN, F. MAXWELL  |                              |                        |
| STREET ADDRESS                                     | · ·  |                                       | 3.3 STREET ADDRESS |   | 9601 W. CALUSA CLUB DRIVE  |                              |                        |
| CITY-ST-ZIP  |  |                                       | 3.4. CFTY-ST-ZIP   |   | MIAMI, FLORIDA 33186   |                              |                        |
| TITLE  | ·  | ☐ DELETE                              | 4.1 TITLE          |   | <b>'</b>   | Change                       | Addition               |
| NAME   | <b> </b>   |                                       | 4. 2 NAME          | Ē   |  |                              |                        |
| STREET ADDRESS                                     | ESS 4.3  |                                       | 4.3 STRE           | ET ADDRESS  |  |                              |                        |
| CITY-ST-ZIP  |  |                                       | 4.4 CITY-          |   |  |                              |                        |
| TITLE  | ]  | ☐ DELETE                              | 5.1 TITLE          |   |  | Change                       | Addition               |

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 suppliemental 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 opporation 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 an an attachment with an address, with all other like empowered.

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADORESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

03/30/99

255-9600

☐ Change

Addition