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

PROFIT
CORPORATION
ANNUAL REPORT
1998

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # H58031

(6)

INTERNATIONAL DEVELOPMENT SERVICES, INC.

Principal Place of Business Mailing Address					3. I ADDIOLI BIOL BIKAL IDIIN ADIAN BIAN ILIAN ALDIN DIBIN D	
17423 S W 89 P O BOX 140 MIAMI FL 331 US	(324	17423 S W 85 AVENUE P O BOX 140324 MIAMI FL 33157 US				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified
						05/20/1985
<del>_</del>	lace of Business	2e. Mailing Address				4. FEI Number Applied For
Suite, Apt.	# Ato	Suite, Apt. #, etc.				59-2720585   Not Applicable
22 Suite, Apr.	π, φισ.	27				5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State		City & State				6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	<b>—</b>	Country		8. This corporation owes or has paid the current year Intangible
24	25	29	30	<del></del>		Personal Property Tax due June 30. Yes No
9. Name and Address of Current Registered Agent				81	Name	10. Name and Address of New Registered Agent
HARTWELL, ROBERT				•		
	123 S W 85 AVENUE NMI FL 33157		<b>82</b> Ste		Street.	Address (P.O. Box Number is Not Acceptable)
MU	WII FL 33131		}	В3		
				84	City	<b>■■■ 85</b> Zip Code
					_	FL   T
11. Pursuant	to the provisions of Sections 607.05	002 and 607.1508, Florida Stati	utes, the at	oove	named	d corporation submits this statement for the purpose of changing its registered reporation's board of directors. I hereby accept the appointment as registered
agent. I a	m familia with and accept he obli	gritions of Section 607.0505	lorida Stat	ules		1 1
SIGNATURE	Marey 17- 4	faifwell	/:	/4	rul	ent 1-17-98
12.		gent and little if applicable (NC ND DIRECTORS	13.	1 Age	nt signature	e required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	DELETE	1.1 11)	LE		Change Addition
NAME	HARTWELL, ROBERT J		1.2 NA	ME	1	
STREET ADDRESS	17423 S W 85 AVENUE		1.3 STREET		ADDRESS	
CITY-\$1-ZIP	MIAMI FL		1.4 CH	1.4 CH1Y - S		
TITLE	8	☐ DEL <b>É</b> TE	2.3 TIT	2.1 TITLE		☐ Change ☐ Addition
NAME	HARTWELL, AUDREY			2.2 NAME		
STREET ADDRESS	17423 S W 85 AVENUE	A DATE OF THE STATE OF THE STAT		2.3 STREET ADDRESS		
CITY-61-ZIP	MIAMI FL	DELETE		2.4 CITY-ST-		Change Addition
TITLE		☐ pr(fife		3.1 TITLE 3.2 NAME		☐ Change ☐ Addition
NAME STREET ADDRESS					ADDRESS	
CITY-ST-ZIP			3.4. CI			
TITLE	<del></del>	DELETE	4.1 (1)		1-21	Change Addition
NAME			4. 2 N/	AME		
STREET ADDRESS			4.3 ST	REET	address	
CITY-ST-ZIP			4.4 C()	Y-ST	- ZIP	
TITLE		☐ DELETE	5.1 TIT	LE		Change Addition
NAME			5.2 NA			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP		DELETE	5.4 C(1		- ZIP	Change T Lattice
TITLE			6.1 TIT			L Change Addition
NAME STREET ADORESS			6.2 NA		ADDDESS	
CITY-ST-ZIP			6.4 CIT		ADDRESS	
14. I hereby c	ertify that the information supplied	with this filing does not qualify	for the exe	mpt	ion state	I ed 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 and on an attachment with an address.						

1-81-98 305-232-319

**FILED** 

Feb 09 1998 8:00am

Secretary of State

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