

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
Mar 04, 1999 8:00 am
Secretary of State

03-04-1999 90153 003 ***150.00

DOCUMENT # H86314

1. Corporation Name
IDS RESEARCH AND DEVELOPMENT, INC.

Principal Place of Business
% LAYNE VEREBAY
190 N.E. 199TH ST., SUITE 204
NORTH MIAMI FL 33179

Mailing Address
% LAYNE VEREBAY
190 N.E. 199TH ST., SUITE 204
NORTH MIAMI FL 33179



DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified	11/20/1985
4. FEI Number	65-0218787
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
8. This corporation owes the current year intangible Personal Property Tax.	<input type="checkbox"/> Yes <input type="checkbox"/> No

2. Principal Place of Business	2a. Mailing Address
21. 888 SE 3RD AVENUE	26. 888 SE 3RD AVENUE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22. FORT LAUDERDALE, FL	27. FORT LAUDERDALE, FL
City & State	City & State
23. #400 33316	28. #400 33316
Zip	Zip
Country	Country
24.	29.
25.	30.

9. Name and Address of Current Registered Agent

VEREBAY, LAYNE
190 N.E. 199TH STREET
SUITE 204
NORTH MIAMI BEACH FL 33179

NEW
ADDRESS
SAME AGENT

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83. 888 SE 3RD AVENUE, #400	
84. FORT LAUDERDALE, FL	

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]

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	1.1 TITLE
NAME	1.2 NAME
STREET ADDRESS	1.3 STREET ADDRESS
CITY-ST-ZIP	1.4 CITY-ST-ZIP
TITLE	2.1 TITLE
NAME	2.2 NAME
STREET ADDRESS	2.3 STREET ADDRESS
CITY-ST-ZIP	2.4 CITY-ST-ZIP
TITLE	3.1 TITLE
NAME	3.2 NAME
STREET ADDRESS	3.3 STREET ADDRESS
CITY-ST-ZIP	3.4 CITY-ST-ZIP
TITLE	4.1 TITLE
NAME	4.2 NAME
STREET ADDRESS	4.3 STREET ADDRESS
CITY-ST-ZIP	4.4 CITY-ST-ZIP
TITLE	5.1 TITLE
NAME	5.2 NAME
STREET ADDRESS	5.3 STREET ADDRESS
CITY-ST-ZIP	5.4 CITY-ST-ZIP
TITLE	6.1 TITLE
NAME	6.2 NAME
STREET ADDRESS	6.3 STREET ADDRESS
CITY-ST-ZIP	6.4 CITY-ST-ZIP

JEFFREY D. ZWIERN c/o ~~DE~~ Change ☐ Addition ☐
LAYNE VEREBAY
888 SE 3RD AVENUE, #400
FORT LAUDERDALE, FL 33316

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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-17-99 305 867 0031

CR2E034 (11/98)