## 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 # J47510

INTERNA	ITIONAL EXPOSITION CON	SULTANTS, INC.					
Principal Place	of Business	Mailing Address			-	I ATASI MIBII MINIS NIUSI N	ABIT B1811 1881
% JAY THALHEIM % JAY THALHEIM 16820 SILVER OAK CIR. 16820 SILVER OAK CIR. DELRAY BEACH FL 33445 DELRAY BEACH FL 33445				DO NOT WRITE IN THIS SPACE		<u>.</u>	
					3. Date Incorporated or Qualifed 12/17/1986		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	<del></del>	plied For
21		26			58-1712821		t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired Fee Required			
City & State	)	City & State	City & State		6. Election Campaign Financing \$5.00 May Be		
23		28		Trust Fund Contribution	Added t	o Fees	
Zìp			Countr	у	8. This corporation owes the current y		□N-
24	1 - 1		30		Personal Property Tax.	∐ Yes	□No
	9. Name and Address of Curren	t Registered Agent	8	1 Name	10. Name and Address of New Regis	tered Agent	
THAI	.HEIM, JAY		ľ				
16820 SILVER OAK CIR.			82	2 Street Ad	dress (P.O. Box Number is Not Acceptable)		
DELRAY BEACH FL 33445			8:	3			-
,			"	"			
				84 City FL 85 Zip Code			
office or re	to the provisions of Sections 607.050: egistered agent, or both, in the State n familiar with, and accept the obliga	of Florida, Such change was	authorized b	v tne corpora	orporation submits this statement for the purp ation's board of directors. I hereby accept the	ose of changing its appointment as re	registered gistered
SIGNATURE							
	Signature, typed or printed name of registered ager			ent signature requ	uired when reinstating)  ADDITIONS/CHANGES TO OFFICE	ATE	NDS IN 12
12.	OFFICERS AND DIRECTORS  DP  Delete		13.		ADDITIONS/CHANGES TO OFFICE	Change	Addition
TITLE	•	<del>-</del>					_
NAME	THALHEIM, JAY 16820 SILVER OAK CIR.		1.2 NAME				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP	DELRAY BEACH FL		1,4 CITY- 2,1 TITLE			[ ] Change	Addition
TITLE	7		2.1 IIILE				_
NAME	THALHEIM, BETH						
STREET ADDRESS	16820 SILVER OAK CIR. DELRAY BEACH FL			ET ADDRESS			
CITY-ST-ZIP TITLE			2. 4 CITY			☐ Change	Addition
NAME	_		3 2 NAME			_	
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP			3.4. CITY				
TITLE	☐ DELETE		4.1 TITLE			☐ Change	Addition
NAME			4. 2 NAMI	E			
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP			4.4 CITY-	1			
TITLE			5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STRE	ET ADORESS			
CITY-ST-ZIP			5.4 CITY-	ST-ZIP		****	
TITLE		☐ DELETE	6.1 TITLE			☐ Change	☐ Addition
NAME			6.2 NAME				
STREET ANNAESS			6.3 STRE	ET ADDRESS			

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.

6.4 CITY-ST-ZIP

SIGNATURE:

Feb 23, 1999 8:00 am Secretary of State

02-23-1999 90018 020 \*\*\*150.00