FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 PM 2:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **J97815** **(1)**

1. Corporate Name

INTERNATIONAL AUDIO VIDEO MARKETING, INC.

Principal Place of Business	Mailing Address
20810 SW 46TH AVE NEWBERRY FL 32669 US	20810 SW 46TH AVE NEWBERRY FL 32669 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **10/15/1987**	3a. Date of Last Report: **05/01/1994**
4. FEI Number: **59-2842570**	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
8. This corporation has only the authority to transact business in Florida but that authority has been withdrawn or revoked in its jurisdiction of incorporation: ☐ Yes ☑ No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / County 25	Zip 29 / County 30

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CRAIG, J. NORMAN 1100-B NW 8TH AVE GAINESVILLE FL 32601	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1509, 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 (If changing Registered Agent, Registered Agent must sign here) DATE

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '97
TITLE D NAME DUKE, STEPHEN JR STREET ADDRESS ~~RT. 3, BOX 322~~ 20810 S.W 46 Av CITY, ST, ZIP NEWBERRY FL 32669	TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY, ST, ZIP
TITLE D NAME DUKE, MARILU STREET ADDRESS ~~RT. 3, BOX 322~~ 20810 S.W 46 Av. CITY, ST, ZIP NEWBERRY FL 32669	TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY, ST, ZIP
TITLE NAME STREET ADDRESS CITY, ST, ZIP	TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY, ST, ZIP
TITLE NAME STREET ADDRESS CITY, ST, ZIP	TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY, ST, ZIP
TITLE NAME STREET ADDRESS CITY, ST, ZIP	TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY, ST, ZIP
TITLE NAME STREET ADDRESS CITY, ST, ZIP	TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY, ST, ZIP

14. I (We) hereby certify that the information supplied with this filing 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 above or on an attachment with an address.

SIGNATURE: S.M. Duke S.M. DUKE, JR 4/30/95 904-472-3335

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0030300 CP

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CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

APPROVED
FILED

DOCUMENT # J99875 (3)

1. Corporate Name
ENGINEERS-SCIENTISTS LABORATORY, INC.

Principal Place of Business	Mailing Address
7270 N.W. 12 STREET SUITE #740 MIAMI FL 33126 US	7270 N.W. 12 STREET SUITE #740 MIAMI FL 33126 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/23/1987	3a. Date of Last Report: 01/25/1994
4. FEI Number: 65-0153327	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☑ Yes ☐ No	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
SACHER, CHARLES P. 2655 LEJEUNE RD. #1101 CORAL GABLES FL	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. Pursuant to the provisions of Section 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

12. OFFICERS AND DIRECTORS	13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS (if)
TYPE: D NAME: CLARK, EDWARD E. STREET ADDRESS: 7270 N.W. 12TH STREET, #740 CITY-ST-ZIP: MIAMI FL	☐ Change ☐ Addition
TYPE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TYPE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TYPE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TYPE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TYPE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

14. To the best of my knowledge, the information supplied with the filing is complete, accurate and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 with an address, with an asterisk, or on an attachment with an address.

SIGNATURE: Edward E. Clark President-Edward E. Clark 305-233-1411
SIGNATURE AND TYPED OR PRINTED NAME OF MANAGING OFFICER OR DIRECTOR

0122687 CF