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 2:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K04666 (9)

1. Corporation Name
INTERNATIONAL VENDORS OF FLORIDA, INC.

Principal Place of Business	Mailing Address
6013 13TH AVENUE NEW PORT RICHEY FL 34653	6013 13TH AVENUE NEW PORT RICHEY FL 34653

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 11/30/1987
3a. Date of Last Report: 07/06/1994

2. Principal Place of Business
21 2857 US HWY 19
22 ~~HOLIDAY~~
23 HOLIDAY, FL.
24 Zip 34691 25 Country USA

2a. Mailing Address
26 6013 13TH AV
27 Suite, Apt. #, etc.
28 NEW PORT RICHEY, FL
29 Zip 34653 30 Country USA

4. FEI Number: 59-2859862 ☐ 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

CLADAKIS, JOAN K.
6013 13TH AVENUE
NEW PORT RICHEY FL 34653

10. Name and Address of New Registered Agent

81 Name: MITCHELL CLADAKIS
82 Street Address (P.O. Box Number is Not Acceptable): 6013 13TH AV
83
84 City: NEW PORT RICHEY FL 85 Zip Code: 34653

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: Mitchell Cladakis 4-20-95
Signature of new registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS (CHANGES) TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE	PREGIDENT	☒ Change ☐ Addition
NAME	CLADAKIS, JOAN K.	1.2 NAME	MITCHELL CLADAKIS	
STREET ADDRESS	6013 13TH AVENUE	1.3 STREET ADDRESS	6013 13TH AV	
CITY-ST-ZIP	NEW PORT RICHEY FL	1.4 CITY-ST-ZIP	NEW PORT RICHEY, FL 34653	
TITLE		2.1 TITLE		☐ Change ☐ Addition
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP		2.4 CITY-ST-ZIP		
TITLE		3.1 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4 CITY-ST-ZIP		
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: Mitchell Cladakis 4-20-95 813-938-4351
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0460213 FP