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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Corporation	MENT # K12136 IGN GROUP, INC.	(3)			
Principal Place of Business 1624 S.E. 13TH STREET FORT LAUDERDALE FL 33316		Mailing Adoress 1624 S.E. 13TH STREET FORT LAUDERDALE FL 33316-2214			
				3. Date Incorporated or Qualified 01/19/1988	3a. Date of Last Report 07/30/1996
·············· '	lace of Business	2a. Mailing Address		4. FEI Number 65-0034143	Applied For
Suite: Apt	#, etc.	Suite, Apt. #, etc.			Not Applicable \$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State	e e	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	- [Ζ φ]	Country	8. This corporation has liability for in	
24	25	29	30	Florida Statutes	Yes No
MOC	 Name and Address of Curren PRISCILLA L. 	Hegistereo Agent	81 Name	10. Name and Address of New Rec	istered Agent
1624	4 S.E. 13TH STREET RT LAUDERDALE FL 33316		83	ress (P.O. Box Number is Not Acceptab	
office or r	to the provisions of Sections 607.050 registered agent, or both, in the State on familiar with, and accept the obligations for the provision of the provision o	of Florida. Such change was trons of, Section 607.0505, f	utes, the above-named corporal sauthorized by the corporal	poration submits this statement for the pition's board of directors. I hereby acception when reinstatuse	urpose of changing its registered the appointment as registered
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
THUE	P	DELETE	1 1 TITLE		☐ Change ☐ Addition
NAME	MOONEY, PRISCILLA L. 1624 S.E. 13TH STREET		1.2 NAME		
STREE* ADDRESS C/TY+S1+ZIP	FORT LAUDERDALE FL		1 3 STREET ADORESS 1 4 CHY+ST-7IP		
TITLE		DELETE	21 TITLE		Change Addition
NAMÉ			22 NAME		
STREET ADDRESS	•		2 3 STREET ADDRESS		
CHY-S1-ZIP TILE		DELETE	2 4 CiTY+ST-ZiP 3 1 TiTLE	, '	Change Addition
NAME		hand Present	3.2 NAME		C change C rashio
STREET ADDRESS			3.3 STREET ADDRESS		
CITY ST-ZIP			3.4. CITY-ST-ZIP		
THLE] DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CHTY-ST-ZIF		DELETE	44 CITY - SI - 7IP 51 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - \$1 - 7iP			5.4 CITY~ST - 7/P		
TITL f		DECETE	6.1 TiTL€		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADORESS		
CHY-ST ZIP	har goathfu (East) than in former ()	1 (4) 44 (10 4 10 10 10 10 10 10 10 10 10 10 10 10 10	6 4 CITY - ST - ZIP	d in Postion 110 07/07/3 Florida College	1 further could shot the
informatic Fam an o	ori indicated on this annual report or s	upplemental annual report is the receiver or trustee empo	s true and accurate and that wered to execute this repo	d in Section 119.07(3)(i), Florida Statutes t my signature shall have the same legal rt as required by Chapter 607, Florida S	I effect as if made under oath; that

SIGNATURE:

KNATURE AND VOED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daylinie Phone #

FILED

Jan 17 1997 8:00am

Secretary of State