

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # K32227 (6)

1. Corporation Name

INTRASERVICES, CORP.



Principal Place of Business

7225 N.W. 25TH ST., #214
MIAMI FL 33122

Mailing Address

7225 N.W. 25TH ST., #214
MIAMI FL 33122

3. Date Incorporated or Qualified 09/01/1988
3a. Date of Last Report 03/28/1995

2. Principal Place of Business 21 1990 NW 82 AVE
2a. Mailing Address 26 1990 NW 82 AVE

4. FEI Number 65-0080929
Applied For Not Applicable

22 Suite, Apt. #, etc.
27 Suite, Apt. #, etc.

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

23 City & State MIAMI, FLA
28 City & State MIAMI, FLA

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

24 Zip 33126 25 Country USA
29 Zip 33126 30 Country USA

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

MATTIOLI, VINCENZO
10602 S.W. 76TH ST.
MIAMI FL 33122

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 607.1508, 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, typed or printed name of 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	NAME	STREET ADDRESS	CITY - ST - ZIP	1.1 TITLE	2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP
	P MATTIOLI, VICENZO	7225 N.W. 25TH ST., #214	MIAMI FL 33122	<input type="checkbox"/> DELETE	1990 NW 82 AVE	MIAMI, FLA. 33126	
	V RINCON, ROBERTO	7225 NW 25TH ST., #214	MIAMI FL 33122	<input type="checkbox"/> DELETE	1990 NW 82 AVE	MIAMI, FL 33126	
	S LOPEZ, MARLENE	7225 NW 25TH ST., 214	MIAMI FL 33122	<input type="checkbox"/> DELETE	1990 NW 82 AVE	MIAMI, FL 33126	
	T RINCON, ROBERTO	7225 NW 25TH ST.	MIAMI FL 33122	<input type="checkbox"/> DELETE	1990 NW 82 AVE	MIAMI, FL 33126	
				<input type="checkbox"/> DELETE			
				<input type="checkbox"/> DELETE			

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 supplementary 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 this address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/96 305/594-7644
Date Daytime Phone #

CR2E034 (12/95)