

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # K35552 (4)

1. Corporation Name

INCOME SERVICE GROUP, INC.



Principal Place of Business

Mailing Address:

~~W. DONALD E. CASTLES~~ Richard Sassi
255 EAST DANIA BEACH BLVD.
DANIA FL 33004

C/O CITIBANK LEGAL DEPT
ONE SANSOME STREET 27TH FLOOR
SAN FRANCISCO CA 94104

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 c/o Citibank Legal Dept.

22 City & State

27 Suite, Apt. #, etc.
28 500 W. Madison St., 8th Floor
City & State
Chicago, IL

23 Zip

Country

29 60661

30 US

3. Date Incorporated or Qualified

09/30/1988

3a. Date of Last Report

10/30/1995

4. FEI Number

65-0079045

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing

☐ \$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

SASSI, RICHARD M.
8750 DORAL BLVD.
MIAMI FL 33178

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 607.0509 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 then if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DVP ☐ DELETE
NAME JO-ANN TITIEL
STREET ADDRESS 8750 DORAL BLVD.
CITY-ST-ZIP MIAMI FL 33178

TITLE VPAS ☐ DELETE
NAME DANIEL R. PORTH
STREET ADDRESS 4041 NORTH CENTRAL AVE
CITY-ST-ZIP MIAMI FL 85012

TITLE DP ☐ DELETE
NAME MCAUSLAN ROBERT R.
STREET ADDRESS 4041 N. CENTRAL AVE.
CITY-ST-ZIP PHOENIX AZ 85012

TITLE S ☐ DELETE
NAME LOCK DALE C.
STREET ADDRESS ONE SANSOME ST. 25TH FL
CITY-ST-ZIP SAN FRANCISCO CA 94104

TITLE VPAS ☐ DELETE
NAME SASSI RICHARD M.
STREET ADDRESS 8750 DORAL BLVD.
CITY-ST-ZIP MIAMI FL 33178

TITLE AS ☐ DELETE
NAME AMY D. HOWLAND
STREET ADDRESS 4041 N. CENTRAL AVE.
CITY-ST-ZIP PHOENIX AZ 85012

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

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☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Richard M. Sassi

Daytime Phone: (305) 599-5807

CR2E034 (12/95)

4-12-96