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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # K35713

(2)

INTERNATIONAL DESIGN & DISPLAY GROUP, INC.							
Principal Place of Business	Mailing Address						
7855 NW 148TH STREET MIAMI LAKES FL 33016	7855 NW 148TH STREET Miami Lakes Fl 33016-1554						
2. Principal Place of Business	2a. Mailing Address						
21	26 Suite Ant # etc						
Suite, Apt. #, etc.	Suite, Apt. #, etc.						
22 <sup>!</sup>	27						

**FILED** Feb 18 1997 8:00am Secretary of State



3a. Date of Last Report

04/08/1996

3. Date Incorporated or Qualified

09/27/1988

2. Principal I	ipal Place of Business 2a. Mailing Address				4. FEI NUMBER	— — — — — — — — — — — — — — — — — — —	oplied For	
21		26			65-0086565	<del></del>	ot Applicable	
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			<b>5.</b> Certificate of Status Desired	\$8.75 / Fee Re		
City & Sta	te	City & State			6. Election Campaign Financing	\$5.00	May Be	
23		28			Trust Fund Contribution	Added 1	to Fees	
Zip	Country	Zip	Country		8. This corporation has liability for intang	jible tax under s	199.032,	
24 25 29 30			30	Florida Statutes				
	9. Name and Address of Curren	Registered Agent		<del>, , , , , , , , , , , , , , , , , , , </del>	10. Name and Address of New Register	ed Agent		
16969 NW 67TH AVE. SUITE 201				81 Name				
				82 Street Address (P.O. Box Number is Not Acceptable)				
MIAMI LAKES FL 33015			83					
		•	84	City		- 85 Zip (	Code	
				<b>'</b>	-	▝▐▃▕▕		
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statut	es, the above	e-named corp	oration submits this statement for the purpos	e of changing it	ts registered	
office or agent. I a	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was a tions of, Section 607.0505, Flo	autnorized by orida Statute:	tne corporati 3.	ion's board of directors. I hereby accept the	appointment as	registered	
SIGNATURE								
SIGNATURE	Signature, typed or printed name of registered ager	it and trie if applicable (NO <sup>1</sup>	E. Registered Age	ent signature require	ed when re-instating) DA*			
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS			
TITLE	PSD	DELETE	1 1 TiTLE			L Change	Addition	
NAME	QUINTON, IAN		1.2 NAME					
STREET ADDRESS	7855 NW 148TH STREET		1.3 STREET	ADDRESS				
CITY - ST - ZIP	MIAMI LAKES FL		1.4 CITY - S	IT - ZIP				
TITLE	D DEPRA DIAME	☐ DELETE	2 1 TITLE			L Change	Addition	
NAME	QUINTON, DEBRA DIANE		2.2 NAME					
STREET ADDRESS	7855 NW 148TH STREET		2.3 STREET	ADDRESS				
CITY - ST - ZIP	MIAMI LAKES FL		2. 4 CITY -	ST-ZIP			A Carre	
TITLE		☐ DELETE	3.1 TITLE			☐ Change	Addition	
NAME			3.2 NAME					
STREET ADDRESS			3.3 S*REET					
CITY - ST - ZIP			3.4 CITY	ST-ZIP		Lob	1 A 4400	
TIFLE		☐ DELETE	4.1 TITLE			☐ Change	Addition	
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET					
CITY - ST - ZIP			4.4 CITY - 9	51 - Z(P		110	3.3300	
TITLE		DELETE	5.1 TITLE			Change	Addition	
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET	ADDRESS				
CITY - ST - ZIP			5 4 CHY-5	51 - ZIP	····		T-12-000	
TIFLE		☐ DELETE	6.1 TITLE			☐ Change	Addition	
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET	ADDRESS				
CITY - ST - ZIP			6 4 CITY - S				<del></del>	
14. I do here	eby certify that the information supplied	with this filing does not quali	ly for the exe	mption stated	I in Section 119.07(3)(i), Florida Statutes. I fu	rther certify that	the	

or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name hment with an address. Lam an officer or director of the corporation or the appears in Block 12 or Block 13, changed, at on