

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

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Apr 21 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # K62856 (5)  
1. Corporation Name  
INFORMATION SCIENCES NORTH AMERICA, INC.



Principal Place of Business Mailing Address  
~~206 WORTH AVE~~  
~~SUITE 201~~  
~~PALM BEACH FL 33480~~  
~~US~~  
P. O. BOX 322  
PALM BEACH FL 33480  
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 616 TEAL AVE 22 Suite, Apt. #, etc. 23 CELEBRATION, FL 24 34747 25 USA	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	3. Date Incorporated or Qualified 02/06/1989 4. FEI Number 59-2918620 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No
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9. Name and Address of Current Registered Agent PEARCE, P.C. <del>4126 WELLINGTON WOODS CIRCLE SUITE 202</del> <del>KISSIMMEE FL 34741</del> 616 TEAL AVE CELEBRATION, FL 34747	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code
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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 TITLE P NAME PEARCE, P.C. <input type="checkbox"/> DELETE STREET ADDRESS <del>4126 WELLINGTON WOODS CIRCLE SUITE 202</del> CITY-ST-ZIP <del>KISSIMMEE FL</del> TITLE D NAME OLIVER, D.M. <input type="checkbox"/> DELETE STREET ADDRESS <del>2047 KEEL COURT SUITE 207</del> CITY-ST-ZIP <del>LANTANA FL</del> TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE ADDRESS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1.2 NAME 616 TEAL AVE. 1.3 STREET ADDRESS CELEBRATION, FL 34747 1.4 CITY-ST-ZIP ADDRESS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2.1 TITLE 10219 ALTAVISTA AVE #311 2.2 NAME TAMPA, FL 33647 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: P.C. PEARCE 4-10-98(561)832-9441

CR2E034 (10/97)