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

PROFIT CORPORATION ANNUAL REPORT

1998



H ORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

INTERN	IATIONAL ELECTRIC COMP	` '					
7506 CAUSEWAY BLVD.		7506 CAUSEWAY BLVD.					
TAMPA FL 33619 US		TAMPA FL 33619		DO NOT WRITE IN THIS	SPACE		
03		US			3. Date Incorporated or Qualified	O AOL	
1					05/08/1989		
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For		
21		26		59-2949709	Not Applicable		
Suite, Apt. #. etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country	Ζφ	Z(μ) Country		8. This corporation owes or has paid the current year Intangible		
24 25		29	30		Personal Property Tax due June 30. Yes No		
g. Name and Address of Current Registered Agent				Name	10. Name and Address of New Registered	Agent	
MCCHORD, STEPHEN			81	Harrio			
	07 CORAL TREE COURT ANDON FL 33511		82	Street Add	dress (P.O. Box Number is Not Acceptable)		
l pro	ANDON PL 33311		83				
			<u>.</u>				
			84	""	FL T T T T T T T T T		
SIGNATURE	to the provisions of Sections 607 63.6 egistered great, or both, in the State in familiar fath, and according obligations by the state of the state	ted			poration submits this statement for the purpose alion's board of directors. I hereby accept the appropriate the purpose of the	of changing its registered pointment as registered	
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12	
TITLE	D	DELETE 1.1				☐ Change ☐ Addition	
NAME	MCCHORD, STEPHEN		1.2 NAME 1.3 STREET ADDRESS				
STREET ADORESS	1907 CORAL TREE COURT						
CITY-ST-ZIP TITLE	BRANDON FL	DELETE	1.4 CITY-ST-ZIP			A LESS	
NAME			2 1 TITLE			☐ Change ☐ Addition	
STREET ADDRESS			2.2 NAME 2.3 STREET	4000000			
CITY-ST-ZIP			2.4 CITY-				
TITLE			3.1 TITLE	51 ' ZIF		Change Addition	
NAME			3.2 NAME				
STREET ADDRESS			33 STREET	ADDRESS			
CITY-ST-ZIP			3.4. CiTY-	ST-ZIP			
TITLE	DELETE 4.1		4.1 TITLE			Change Addition	
NAME		4					
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP		DECETE	4.4 CiTY+S	it - ZIP			
TITLE		DELFTE	5.1 TITLE			Change Addition	
NAME CYDEET ADODESC			5.2 NAME	ADDDCCC			
STREET ADDRESS CITY+ST-ZIP			5.3 STREET				
TITLE			5.4 C/TY - S 6.1 T/TLE	ot - 21P		Change Addition	
NAME		FT Secre	6.2 NAME	-		Properties Properties	
STREET ADDRESS			6.3 STREET	ADDRESS			
CITY OF THE			C.4 DITH C	T TO			

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 suppliemental 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 changes, or on an attachment with an address

Stephen Mchard

1/31/98 (813)622-6668

FILED

Feb 09 1998 8:00am

Secretary of State