SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Sep 17 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # L08131

(9)

INTERNATIONAL SALES AND SERVICE, INC.

Principal Place of Business Mailing Address						
12700 SW 145 ST Miami FL 33186		12700 SW 145 ST MIAMI FL 33186		DO NOT WRITE	IN THIS SPACE	
				3. Date Incorporated or Qualified	3a. Date of Last Report	
				08/10/1989	09/06/1996	
2. Principal Pi	lace of Business	2a, Mailing Address		4. FEI Number	Applied For	
21		26		65-0135536	Not Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		City & State			Fee Required	
City & State		28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has pa		
24	25	<u> </u>	30	Personal Property Tax due June		
	9. Name and Address of Curre			10. Name and Address of New Re		
GANTT, RAGAN			81 Name			
9990 SW 77 AVE			82 Street A	ddress (P.O. Box Number is Not Acceptab	ile)	
SUI	TE 330			, , , , , , , , , , , , , , , , , , , ,		
MIAMI FL 33156			83			
			84 City		85 Zip Code	
					FL	
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 a	COAT and talk it analogable (NOT)	E: Registered Agent signature re	omitted when reinetating)	DATE	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE		
TITLE	PD	☐ DELETE	1.1 TITLE		Change Addition	
NAME	Bravo, Brenda L		1.2 NAME			
STREET ADDRESS	12700 SW 145 ST		1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAM) FL		1.4 CITY-ST-ZIP			
TITLE	Ď	☐ DELETE	2.1 TITLE		Change Addition	
NAME	BRAVO, GERMAN		2.2 NAME			
STREET ADDRESS	12700 SW 145 ST		2.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL	□ beleve	2. 4 CITY-ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE		Change Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP		☐ DELETE	3.4. CITY-ST-ZIP		Change Addition	
TITLE			4.1 TITLE		CT Offende CT vanion	
NAME STREET ADDRESS			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	- 4.4 CITY-ST-ZIP 5.1 TITLE		☐ Change ☐ Addition	
NAME		best TTTT	5.2 NAME		VIIV	
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-SY-ZIP			
TITLE		☐ DELETÉ	6.1 TATLE	•	Change Addition	
NAME		-	6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY - ST - ZIP			
14. I do hereb			y for the exemption sta	ited in Section 119.07(3)(i), Florida Statute		
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 Statutos; and that my name appears in Block 12 a Block 13 if changed, or an attachment with an address.						