

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.)

1

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # L10831 (0)
1. Corporation Name
INDUSTRIAL RESEARCH AND MANUFACTURING CORP.

Principal Place of Business
12525 NW 21ST PLACE
MIAMI FL 33167

Mailing Address
12525 NW 21ST PLACE
MIAMI FL 33167

FILED
97 AUG 29 AM 10:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 08/21/1989		3a. Date of Last Report 05/01/1996	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		4. FEI Number 65-0139862		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country		29 Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
LOGUDICE, ROBERTO C. 12525 NW 21ST PLACE MIAMI FL 33167				81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 200002283532-4 -09/03/97--01026--021 84 City ****165.00 ***165.00 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 agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LOGUDICE, ROBERTO C.	1.2 NAME	
STREET ADDRESS	12525 NW 21 PLACE	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	
TITLE	DV	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LOGUDICE, ROBERT C.	2.2 NAME	
STREET ADDRESS	12525 NW 21 PLACE	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	
TITLE	DST	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LOGUDICE, NIEVES I.	3.2 NAME	
STREET ADDRESS	12525 NW 21 PLACE	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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

[Signature]

04-11-97

305-685-9115

Professional Building
1601 North Palm Avenue
Suite 208
Pembroke Pines, Florida 33026
Phone: (954) 430-7675
Fax: (954) 430-7674

RICHARD A. SPAHN & ASSOCIATES, P.A.
ACCOUNTING AND TAX CONSULTANTS

12700 S.W. 112th Street Road
Dunnellon-Ocala, Florida 34432
Phone: (352) 489-6553

AUGUST 25, 1997

FLORIDA DEPARTMENT OF STATE:

RE: INDUSTRIAL RESEARCH &
MANUFACTURING CORPORATION
DOCUMENT # L 10831

THE TAXPAYER REQUESTED THAT I WRITE YOU CONCERNING THE ATTACHED ANNUAL REPORT FOR 1997 WHICH WAS NEVER RECEIVED BY YOUR OFFICE PRIOR TO MAY 01, 1997.

THE TAXPAYER SHOWED TO ME A DAMAGED MAILING NOTICE RECEIVED FROM THE POST OFFICE AND APPARENTLY THE ORIGINAL MAILING TO YOUR OFFICE WAS DESTROYED BY THE POST OFFICE.

THE TAXPAYER IS RESUBMITTING THE ANNUAL REPORT FOR 1997 WITH A CHECK FOR THE ORIGINAL AMOUNT.

IT IS THE TAXPAYER'S WISH THAT YOUR OFFICE WILL ACCEPT THIS FILING AS IF IT WERE FILED TIMELY.

SINCERELY

