

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

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Mar 04, 1999 8:00 am  
Secretary of State

03-04-1999 90256 012 \*\*\*150.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # L66590

1. Corporation Name

INTER-GLOBE DISTRIBUTIONS, INC.

Principal Place of Business

1747 INDEPENDENCE BLVD  
E-13  
SARASOTA FL 34234

Mailing Address

1747 INDEPENDENCE BLVD  
E-13  
SARASOTA FL 34234

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/19/1990

4. FEI Number

65-0188024

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

Yes No

2. Principal Place of Business

2a. Mailing Address

21 6835- 14ST W.

26 6835- 14ST WEST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 BRADENTON FL

27 BRADENTON FL

23 FL 34207

28 BRADENTON FL

24 Zip Country

25 USA

29 Zip Country

30 34207 USA

9. Name and Address of Current Registered Agent

TRUDEL, FRANCINE  
1747 INDEPENDENCE BLVD #E-13  
SARASOTA FL 34234

10. Name and Address of New Registered Agent

81 Name  
TRUDEL FRANCINE  
82 Street Address (P.O. Box Number is Not Acceptable)  
6835- 14TH ST WEST  
83  
84 City BRADENTON FL 85 Zip Code 34207

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	DP	DELETE
NAME	TRUDEL, LOUIS	
STREET ADDRESS	1747 INDEPENDENCE BLVD. #E-13	
CITY-ST-ZIP	SARASOTA FL 34234	
TITLE	DST	DELETE
NAME	TRUDEL, FRANCINE	
STREET ADDRESS	1747 INDEPENDENCE BLVD. #E-13	
CITY-ST-ZIP	SARASOTA FL 34234	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
		6835- 14TH ST WEST	BRADENTON FL 34207		
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	Change	Addition
		6835- 14TH ST WEST	BRADENTON FL 34207		
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	Change	Addition
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	Change	Addition
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	Change	Addition
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	Change	Addition

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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Francine TRUDEL 02.11.99 941-752-0554

CR2E034 (11/98)