

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

1995



SECRETARY OF STATE
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY -1 PM 12:47

DOCUMENT # L83441

(0)

INTERMARCON, INC.

P O BOX 677923
ORLANDO FL 32867

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ORLANDO FL 32867

STATE OF FLORIDA, INCORPORATED

2	2a	3	3a
21	26	06/26/1990	07/12/1994
22	27	4	59-3036961
23	28	5	\$8.75 Additional Fee Required
24	29	6	\$5.00 May Be Added to Fees
	30	6	FL 85

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SVOBODA, LIDA
7863-D SHOALS DR.
ORLANDO FL 32817

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FL

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11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the foregoing is a true and correct copy of the original of the same as the same appears in the records of the Division of Corporations, State of Florida.

SIGNATURE

12. OFFICER AND DIRECTORS

13. ADDITIONAL CERTIFICATES TO OFFICER AND DIRECTORS

NAME	PD	NAME	
ADDRESS	SVOBODA, LIDA	NAME	
CITY	7863D SHOALS DRIVE	NAME	
STATE	ORLANDO FL	NAME	
NAME		NAME	
ADDRESS		NAME	
CITY		NAME	
STATE		NAME	
NAME		NAME	
ADDRESS		NAME	
CITY		NAME	
STATE		NAME	
NAME		NAME	
ADDRESS		NAME	
CITY		NAME	
STATE		NAME	
NAME		NAME	
ADDRESS		NAME	
CITY		NAME	
STATE		NAME	

14. I, the undersigned, being a resident of the State of Florida, do hereby certify that the foregoing is a true and correct copy of the original of the same as the same appears in the records of the Division of Corporations, State of Florida.

SIGNATURE:

SVOBODA, LIDA
LIDA SVOBODA

5-8-95

407-677-0655