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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(8)

INTERACTIVE RESOURCES, INC.

FILED May 11 1998 8:00am Secretary of State



					{		
Principal Place of Business Mailing Address						***** • • • • • • • • • • • • • • • • •	
PO BOX 215		PO BOX 21545					
FT LAUDERDALE FL 33335		FT LAUDERDALE FL 33335		DO NOT WRITE IN THIS SPACE			
US		US		3. Date Incorporated or Qualified			
					06/26/1986		
2. Principal F	Place of Business	2a, Mailing Address			4. FEI Number		Applied For
21		26		59-2714703	 -	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75	Additional	
22		27		5. Certificate of Status Desired	Fee I	Required	
City & State		City & State	City & State		6. Election Campaign Financing	\$5.0	O May Be
23		[28]		Trust Fund Contribution	Added Added	d to Fees	
Zip	Country	Zip	Coun	lry	8. This corporation owes or has p		
24	25	29]	30	 	Personal Property Tax due Jun 10. Name and Address of New R		☐ No
5 1	9. Name and Address of Currer	nt Hegistered Agent		Name	10. Name and Address of New H	egistereo Agent	
	Chard K. Duncan 23 Sw 1 Ave			, i i i i i i i i i i i i i i i i i i i			
		[4	Street Add	ress (P.O. Box Number is Not Accepta	able)		
FT. LAUDERDALE FL 33315			-	33			
			Ľ	~			
			[8	34 City	· · · ·	FL 85 Zip	o Code
44 Purpugat	to the provisions of Sections 607.0%	2 and 607 1508 Florida Statut	ae tha ab	nue-named cor	poration eulemite this statement for the	numose of changing	ite registered
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, typical or printed hand of registered agent and title if approaching (MOTE: Registered Agent signature required when reinstating) DATE DATE							
12.		D DIRECTORS	13.	9	ADDITIONS/CHANGES TO OFF		DRS IN 12
TITLE	PD	DELETE	1.1 TrTL	E		☐ Change	Addition
NAME	DUNCAN, BEVERLY F.		1,2 NAA	16			
STREET ADDRESS	1423 SW 1 AVE		1.3 STREE1 ADDRESS				
CITY-ST-ZIP	FT. LAUDERDALE FL 1.40		1,4 CITY	'-ST-21P			
TITLE	DELETE 2.17		2.1 7(7)	Ε		Change	Addition
NAME	WILCOX, CHERYL A.		2.2 NAME				
STREET ADDRESS	1038 NE 4TH AVE., #3		2.3 STREET ADDRESS				
CITY-ST-ZIP	FT. LAUDERDALE FL		2. 4 CITY - ST - ZIP				
TITLE			3.1 TITE	E		Change	Addition
NAME	D UNCAN, RICHARD K		3.2 NAM	lE .]
STREET ADDRESS	1423 SW 1 AVE		3.3 STR	EET ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE FL		3.4. CłT	Y-ST-ZIP			
TITLE		DELETE	4.1 TITL	E		☐ Change	: 🔲 Addition
NAME			4. 2 NAI	AE			- 1
STREET ADDRESS			4.3 STR	ET ADDRESS			
CITY-ST-ZIP				-ST-ZIP			
TITLE		☐ DELETE	5.1 THIL			Change	Addition
NAME			5.2 NAM				l
STREET ADDRESS			5.3 STRI	ET ADDRESS			!
CITY-ST-ZIP				-ST-ZIP			
TITLE	☐ DELETE		6.1 T(TL	I		Change	Addition
NAME			6.2 NAM	iE			}
STREET ADDRESS	_		6.3 \$1R	ET ADDRESS			
CITY-ST-ZIP				- ST- ZIP			
14. I hereby (certify that the information supplied w	rith this tiling does not qualify fo	or the exen	nption stated in	Section 119.07(3)(i), Florida Statutes.	I further certify that th	ne information

tal annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an ceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in prehimp It with an address. indicated on this annual riport or sofficer or director of the dorpgration Block 12 or Block 13 if glianned or