Feb 23, 1999 8:00 am Secretary of State

02-23-1999 90038 030 ***150.00

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

→ PROFIT **CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M49591

1. Corporation Name

INTERSE	ERVICE, CORP.						
Principal Plac	e of Business	Mailing Address			3 (ABEMMI) III DIAIN INIAI AIREA IREE IIAI AIR	'i Bibil Alâlt Atati A	(8)(8(8)) 1881
7300 NW 35TH TERR 7300 NW 35TH TER							
SUITE 204 SUITE 204					DO NOT WRITE IN TH	IIS SPACE	
MIAMI FL 33122 MIAMI FL 33122			Ì		3. Date Incorporated or Qualifed		
		•			04/02/1987		ļ
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Api	plied For
21		26 P.O. BOX 52	230) /	59-2839558	No.	t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional		
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00	May Be
23		28 MIAMI	F	2_	Trust Fund Contribution	Added to	
Zip	Country	29 Zip 33 1Q -2301 30	Country		8. This corporation owes the current year		
24	25	29 35 (12 - 2524 30	1		Personal Property Tax.		□No
	9. Name and Address of Curre	nt Registered Agent	81	Name	10. Name and Address of New Registere	a Agent	
МАЯ	RINO, ALBERTO J		0,				
7300 NW 35TH TERRACE			82	Street Addr	ress (P.O. Box Number is Not Acceptable)		
SUITE 204			83				
MIAMI FL 33122			ļ			 	
			84	City	FL 85 Zip		Code
SIGNATURE	m familiar with, and accept the obligation of th	ant and title if applicable (NOTE: Re	gistered Ager		od when reinstating) DATE		
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	Addition
TITLE	PD	☐ DELETE	1.1 TITLE			□ ćirange	777700000
NAME	MARINO, ALBERTO J SR 7300 NW 35TH TERRACE		1.2 NAME 1.3 STREET ADDRESS				
STREET ADDRESS	MIAMI FL		1.4 CITY-S				
CITY-ST-ZIP TITLE	SD .	☐ 0ELETE	2.1 TITLE	11-21		Change	☐ Addition
NAME	MARINO, ALBERTO J JR.	_	2.2 NAME	}			ľ
STREET ADDRESS	TODA ANALOGERAL TEODA OF		2.3 STREE	T ADDRESS			
CITY-ST-ZIP	MIAMI FL 33122		2.4 CITY-5	ST-ZIP			
TITLE	TD	☐ DELETE	3.1 TITLE			Change	☐ Addition
NAME	MARINO, IVETTE C		3.2 NAME				
STREET ADDRESS	L .	ACE 3.3 S		T ADDRESS			
CITY-ST-ZIP	MIAMI FL 33122			ST-ZIP		☐ Change	Addition
TITLE		□ DETEIE	4.1 TITLE			□ onlingo	
NAME			4. 2 NAME	T ADDRESS			Ì
STREET ADDRESS			4.3 STREE				
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITLE	.,		☐ Change	Addition
NAME			5.2 NAME			<i>:</i>	-
STREET ADDRESS			5.3 STREE	TADDRESS	•		Ì
CITY-ST-ZIP			5.4 CITY-S	ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE	"		Change	☐ Addition
NAME	ì		6.2 NAME	ļ	· ·		

6.4 CITY-ST-ZIP CITY-ST-ZIP 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 changes of an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

SIGNATURE

STREET ADDRESS

AUBERTO J. MARINO SR.