

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 27 AM 11:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M54785 (4)

1. Corporation Name
IGI INTERNATIONAL, INC.

Principal Place of Business
13899 BISCAYNE BLVD S205
NORTH MIAMI BCH FL 33181

Mailing Address
13899 BISCAYNE BLVD S205
NORTH MIAMI BCH FL 33181

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 07/01/1987	3a. Date of Last Report 05/01/1994
4. FEI Number 59-2845283	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 has liability for intangible tax under S. 189.032, Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent

LAMONT & NEIMAN
3850 BISCAYNE BLVD.
S-610
MIAMI FL 33147

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83 City	
84 State	

ONE BISCAYNE TOWER, STE 3550
2 SOUTH BISCAYNE
MIAMI FL 33131

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 date if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	THOMAS, JOSEPH M.	1.2 NAME	
STREET ADDRESS	13899 BISCAYNE BLVD S205	1.3 STREET ADDRESS	
CITY - ST - ZIP	N. MIAMI BEACH FL	1.4 CITY - ST - ZIP	
TITLE	CD	2.1 TITLE	☐ Change ☐ Addition
NAME	THOMAS, DIANA N.	2.2 NAME	
STREET ADDRESS	13899 BISCAYNE BLVD. S205	2.3 STREET ADDRESS	
CITY - ST - ZIP	N. MIAMI BEACH FL	2.4 CITY - ST - ZIP	
TITLE	V	3.1 TITLE	☒ Change ☐ Addition
NAME	BENTLEY-BAKER, KANDELL	3.2 NAME	
STREET ADDRESS	13899 BISCAYNE BLVD. S205	3.3 STREET ADDRESS	D, V and S
CITY - ST - ZIP	N. MIAMI BEACH FL	3.4 CITY - ST - ZIP	
TITLE	V	4.1 TITLE	☒ Change ☐ Addition
NAME	FISHER, WILLIAM	4.2 NAME	
STREET ADDRESS	1133 15TH ST., NW S4200	4.3 STREET ADDRESS	William Fisher no longer an officer of IGI. Please delete.
CITY - ST - ZIP	WASHINGTON DC	4.4 CITY - ST - ZIP	
TITLE	G	5.1 TITLE	☒ Change ☐ Addition
NAME	ANDERSON, JOANNE	5.2 NAME	
STREET ADDRESS	13899 BISCAYNE BLVD. S205	5.3 STREET ADDRESS	Please delete Joanne Anderson (Richardson) as an officer
CITY - ST - ZIP	N. MIAMI BEACH FL	5.4 CITY - ST - ZIP	
TITLE	D	6.1 TITLE	☐ Change ☐ Addition
NAME	SOLOMON, CAROL	6.2 NAME	
STREET ADDRESS	1750 CHARLES ST., (APT. 318)	6.3 STREET ADDRESS	
CITY - ST - ZIP	NEW ORLEANS LA	6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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:

Joseph M. Thomas

Joseph M. Thomas, President

305-956-2713