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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000022863 (3)

FILED May 07 1998 8:00am Secretary of State

INVESTMENT BUILDING GROUP, I	INC.				
Principal Place of Business	Mailing Address				
HBISCUS RD 2700 E BAY DR ELLEAIR FL 34616 SUITE 200 LARGO FL 33771 US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
	03			03/26/1993	
2. Principal Place of Business	2a. Mailing Address			4. FEI Number Applied For	****
21 2700 E BAY DR	26			59-3228318 Not Applicable	le
Suite, Apt. #, etc 22 SUITE 200	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional Fee Required	
City & State LARGO FL	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution ☐ Added to Fees	
Zip Country USA	Zip Country			This corporation owes or has paid the current year Intangible	\neg
		30		Personal Property Tax due June 30. K Yes No	
g, Name and Address of Curren	nt Registered Agent	81	T	10. Name and Address of New Registered Agent	_
COOPER, LARRY T		81	Name	Ð	
2700 E BAY DR SUITE 200		82		ddress (P.O. Box Number is Not Acceptable)	
LARGO FL 33771		83			
		84	City	FL 85 Zip Code	
office or registered agent, or both, in the State agent. I am familiar with, and accord the State SIGNATURE SIGNATURE When for which have or legistered agent. OF LICERS ANI	of Florida, Such change was a moon of, Section 607,0505, Florida and his of applicable. NOTE	uthorized b rida Statute	y the corp s.	od corporation submits this statement for the purpose of changing its registered or poration's board of directors. I hereby accept the appointment as registered or equired when reinstating. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	DELETE	4 1 THE C		Change A Addition	3n \$
NAME COOPER, LARRY T		1 2 NAME		P Stienge C Addition	2
STREET ADDRESS 1 HIBISCUS RD		1.3 STREET	ADDRESS	s	١٤
CITY-ST-ZIP BELLEAIR FL 34616		1.4 CITY - 9	ST-ZIP		
TITLE	DELFTE	2.1 1111.E		D/S/T Change XX Addition	ın c
NAME		2.2 NAME		COOPER, MONICA	
STREET ADDRESS				I HIBIBOOD RD	- 1
CITY-ST-ZIP	DELETE	2 4 CITY- 3 1 THLE	ST-ZIP	BELLEAIR FL 34616	
NAME		3.2 NAME		Chango Hadrido	"
STREET ADDRESS		3.3 STREET	FADDRESS	s	-
CITY-ST-ZIP		3.4 CITY-ST-ZIP			
TITLE	DELETE	4.1 TITLE		☐ Change ☐ Additio)N
NAME		4 2 NAME			
STREET ADDRESS		43 STREET	ADDRESS	5	-
CITY-S1-ZIP	Process	44 CITY - S	ST-ZIP		_
TITLE	☐ DELETE	5 1 TITLE		Change Additio	n [
NAME		5 2 NAME	i		-
STREET ADDRESS		5 3 STREET ADDRESS		i	
CITY-ST-ZIP TITLE	DELETE	5.4 CITY - 5 6.1 TILLE	SI - ZIP	Change Additio	<u></u>
NAME	C1 better	6.2 NAME		C Shariye C Modulo	"
STREET ADDRESS		6.3 STREET	ADORESS		
CITY-ST-ZIP		64 CITY - S			
	ith this filing does not qualify fo			ated in Section 119.07(3)(i), Florida Statutes. I further certify that the information	\exists

indicated on this amount report or supplemental 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 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:

(813)538-9193