

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # P93000036551 (8)

1. Corporation Name

INTERSTATE SYSTEMS CORP.

FILED

1995 AUG 10 AM 9:18

TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.

Principal Place of Business		Mailing Address	
3213 ANDERSON RD. ORLANDO FL 32806		3213 ANDERSON RD. ORLANDO FL 32806	
2. Principal Place of Business		2a. Mailing Address	
21 5432 CANWAY OAKS COURT		26 5432 CANWAY OAKS COURT	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.	
23 ORLANDO FL		28 ORLANDO FL	
24 32812		29 32812	
Country USA		Country USA	

3. Date Incorporated or Qualified	3a. Date of Last Report
05/20/1993	08/12/1994
4. FEI Number	Applied For
59-3190830	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. 199.032, Florida Statutes	
☐ Yes ☐ No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
MOON, WALTER R 1218 E. ROBINSON STREET ORLANDO FL 32801		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	
		FL	
		85 Zip Code	

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPT	1.1 TITLE	☐ Change ☐ Addition
NAME	KNAUS, WILLIAM G	1.2 NAME	
STREET ADDRESS	3213 ANDERSON RD.	1.3 STREET ADDRESS	
CITY - ST - ZIP	ORLANDO FL 32806	1.4 CITY - ST - ZIP	
TITLE	DVS	2.1 TITLE	☐ Change ☐ Addition
NAME	KNAUS, DIANA M	2.2 NAME	
STREET ADDRESS	3213 ANDERSON RD.	2.3 STREET ADDRESS	
CITY - ST - ZIP	ORLANDO FL 32806	2.4 CITY - ST - ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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:

Diana M. Knaus

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/4/95

Date

Telephone Number

(407) 857-8003