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

PROFIT CORPORATION **ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Jan 28 1998 8:00am Secretary of State

DOCUMENT # P93000038029 (3)															
			ISES, INC.			. ,									
Principal Place	e of Busines	is.	·	Mailing Address											
7581 LA CORNICHE CIR 7581 LA CORNICHE (,							
BOCA RATON		BOCA RATON FL 33433							DO NOT WITH	F 15 1 75 110 0	ND 4 40 E				
U\$		US						3 [DO NOT WRIT Date Incorporated or Qualified	<u> </u>	PACE				
											••	05/24/1993			
2. Principal Pi	lace of Busi	ness		2a. Mailing Address							El Number		A	pplied For	
21		2	26							65-0414060		N	ot Applicable		
Suite, Apt.	#, etc.	-	Suite, Apt. #, etc.						5. 0	Certificate of Status Desired			Additional equired		
22 City & State		2	City & State							Testion Compolen Financing					
23		2	28							Election Campaign Financing frust Fund Contribution			May Be to Fees		
Zip	Country				—			Country				his corporation owes or has p	-		`
24 25 2 9. Name and Address of Current Re						29 30 30						Personal Property Tax due Jur Name and Address of New F			<u> </u>
VEI			ont Ho	Biereien	Ago III	T	Name	10.	Tamo and Address of Hon F	egistored P	gent				
KERZNER, HOWARD 7581 LA CORNICHE CIRCLE								20 0			400 (D.C	D. Box Number is Not Accepte	ahla\		
	CA RATON						82 Street Addres			J. Box Number is Not Accept	iole)				
					83										
									+-	City	· - · · · · · · · · · · · · · · · · · ·	<u></u>	FL	85 Zip	Code
11. Pursuant t	to the provis	ions o	Sections 607.0	502 and	d 607.15i	08, Florida Statu	ites, th	he abov	e-r	named corpo	oration :	submits this statement for the	purpose of	changing i	ts registered
office or re	egi s tered ag m f a miliar w	ent, o ith, an	r both, in the Sta d accept the obl	te of Fl idations	orida. Su s of, Sect	ich change was tion 607.0505. F	autho Iorida	orized b Statute	y ti s.	he corporation	ion's bo	ard of directors. I hereby acc	ept the appo	intment as	registered
SIGNATURE											-				
	Signature, typed	or print	d name of registered a				_		ent	signature require			DATE	DIDEOTOL	20.141.40
12.	PTS		OFFICERS A	אט טא				13.		AL	ODITIONS/CHANGES TO OFF	ICEHS AND	Change	Addition	
NAME	KERZNE	R H	OWARD					1.2 NAME							
STREET ADDRESS			NICHE CIR					1.3 STREET ADDRESS							
CITY-ST-ZIP	BOCA F				1			1.4 CITY-ST-ZIP							-
TITLE					☐ DELETE			2.1 TITLE						☐ Change	Addition
NAME									2.2 NAME			1			
STREET ADDRESS									2.3 STREET ADORESS						
CITY-ST-ZIP TITLE					DELETE			2. 4 CITY - ST - ZIP 3.1 TITLE						Change	Addition
NAME						□ orrest		3.2 NAME		1				Oracigo	Addition
STREET ADDRESS					· ·			3.3 STREET ADDRESS							
CITY-ST-ZIP								3 4. DITY-							
TITLE						DELETE		4.1 TITLE					**	Change	☐ Addition
NAME								4. 2 NAME							
STREET ADDRESS							1	4.3 STREET	AD	DRESS					
CITY-ST-ZIP				-		T DELETE		4.4 CITY - 5	1-	ZIP					
TITLE						☐ DELETE		5.1 TITLE						Change	L. Addition
NAME CTREET ADDOCCO								5.2 NAME	r arv	nnecec					
STREET ADDRESS							- 1	5.3 STREET							
CITY-ST-ZIP TITLE						DELETE		5.4 CITY - 9 6.1 TITLE	1114	411				Change	Addition
NAME								6.2 NAME						-	İ
STREET ADDRESS							ı	6.3 STREET	(AD	ODRESS					
CITY-ST-ZIP								6.4 CITY - 5	_						
14 I hereby c	ertify that th	e infor	metion supplied	with the	s filing d	nes not mustify!	for the	evemn	tio	n stated in S	Section	119 07(3)(i) Florida Statutes	Lfurther cer	tify that the	information

I nereby 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 informatic indicated on this annual report or supplicit in the corporation of the corporation or the receiver or trusted 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.