## 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** 

DOCUMENT # P93000047445 (0)

INTERCONTINENTAL DISTRIBUTION GROUP, LTD., INC.

## **FILED** Mar 04 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address					
4401 W TRADEWINDS AVE #201 LAUDERDALE BY THE SEA FL 33308		4401 W TRADEWINDS AVE #201 LAUDERDALE BY THE SEA FL 33308					
					DO NOT WRITE IN THIS S	SPACE	
					<ol> <li>Date Incorporated or Qualified</li> <li>07/07/1993</li> </ol>		
2. Principal Pi	lace of Business	2a. Maiting Address			4. FEI Number		pplied For
21		26			65-0423204	T N	lot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75	Additional
22		27	27		5. Certificate of Status Desired	Fee F	Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be		
23		28	28		Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Count	y	8. This corporation owes or has paid the cur	rent vear l	ntangible
24	25	29	30				☐ No
	9. Name and Address of Curre		1331		10. Name and Address of New Registered	Agent	
KA	RR. PAUL MATTHEW		8	Name			
	DI WEST TRADEWINDS AVENU	iF	8:				
2ND FLOOR, SUITE 201				Street A	Address (P.O. Box Number is Not Acceptable)		]
	UDERDALE BY-THE-SEA FL 33:	308	6:	3			
LA	ODENDALE DIVINE-SEA PL 33	300	1	1			
			8	4 City	FL	85 Zir	Code
				<u> </u>			76: 4
11. Pursuant	to the provisions of Sections 607.05	502 and 607.1508, Florida Statu te of Florida, Such channe was	ries, the abo	ve-named o	corporation submits this statement for the purpose of oration's board of directors. I hereby accept the app	changing ointment a	its registered
agent. I a	m familiar with, and accept the obli	gations of, Section 607.0505, F	lorida Statut	es.	oration's board of directors. I hereby accept the app		
SIGNATURE							
DIGHTIONE	Signature, typied or printed name of registered a	gent and bite if applicable (NO	T£ Registered A	gent signature i	required when reinstating) DATE		
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	P	☐ DELETE	1.1 TITLE			☐ Change	☐ Addition
NAME	KARR, PAUL MATTHEW		1.2 NAM	:			
STREET ADDRESS	4401 W. TRADEWINDS AVE	NUE, SUITE 201	1.3 STRE	ET ADDRESS			
CITY-ST-ZIP	LAUDERDALE BY-THE SEA	FL 33308	1.4 CITY	-ST-ZIP			
TITLE	V	DELETE	2.1 TITLE			Change	Addition
NAME	COCOLA, STEVE		2.2 NAMI	:	The section		
STREET ADDRESS	4401 W. TRADEWINDS AVE	NUE, SUITE 201	2.3 STRE	ET ADDRESS			
CITY-ST-ZIP	LAUDERDALE BY-THE-SEA		2. 4 CITY				
TITLE		☐ DELETE	31 TITLE			Change	Addition
NAME			3.2 NAM				
·				ET ADDRESS			
STREET ADDRESS							
CITY-ST-ZIP		DELETE	3 4. CITY			☐ Change	Addition
TITLE		L DELETE	4.1 TITLE	1		L., UTKINGE	L Addition
HAME			4. 2 NAM				1
STREET ADDRESS			4.3 STRE	ET ADDRESS			
CITY-ST-ZIP			4.4 CITY	-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE		•	Change	Addition
NAME			5.2 NAM	E			
STREET ADDRESS			5.3 STRE	ET ADDRESS			
CITY-ST-ZIP			5.4 CITY	-ST-ZIP			
TITLE		DELETE	6.1 TITLE			Change	Addition
NAME		_	6.2 NAM	I		•	
				ET ADDRESS			
STREET ADDRESS				I			
CITY-ST-ZIP			6.4 CITY		d in Castian 410 07/2Vi). Florida Statutas I further as		

SIGNATURE: