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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P93000050135 (1)

INFORMATION SERVICE PROVIDERS, INC.

FILED May 09 1997 8:00am Secretary of State

| Principal Place of Business 13485 NW 6 DR PLANTATION FL 33325 | Mailing Address 13485 NW 6 DR PLANTATION FL 33325-61 | 139 | | | | | |
|---|--|--|--|---|---------------------------------|----------------------------|--|
| | | | | Date Incorporated or Qualified 07/19/1993 | 3a. Date of 08/16/1 | | eport |
| 2. Principal Place of Business | 28. Mailing Address | | | 4. FEI Number 65-0426867 | | | plied For |
| Sude, Apt. #, etc | Suite, Apt. #, etc. | . | | Certificate of Status Desired | 1 1 7 | | t Applicable Additional |
| City & State | City & State | | | 6. Election Campaign Financing | | | May Be |
| 23 | 28 | 1 0 | | Trust Fund Contribution | | Added to | o Fees |
| Zip Country 25 | Zip 29 | 30 Coun | Try . | 8. This corporation has liability for in Florida Statutes | ntangible tax u] Yes 🏻 🔲 No | | 199.032, |
| 9. Name and Address of | | | | 10. Name and Address of New Re | gistered Agen | ıt | |
| SHIELDS, BOB | | 8 | Name | | | | |
| 592 NW 111 TERR | | ε | Street Add | ress (P.O. Box Number is Not Acceptab | le) | | ······································ |
| CORAL SPRINGS FL | | Ē | 33 | | | | |
| | | | | | | 1 ~ 2 | |
| | | | 34 City | | FL 85 | i Zip (| Jode |
| agent. I am familiar with, and accept the SIGNATURE | | | | tion's board of directors. I hereby accep | A trio appoints | ioni us | |
| | | | Agent signature requi | ired when reinstating) | DATE | ECTOR | C IN 12 |
| 12. OFFICE | RS AND DIRECTORS | 13. | | irad when reinslating) ADDITIONS/CHANGES TO OFFIC | ERS AND DIR | | |
| 12. OFFICE THE D | | | E | | ERS AND DIR | ECTOR: Change | S IN 12 |
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| 12. OFFICE 1/ILE D NAME GRIPPO, ROGER | RS AND DIRECTORS | 13. 1.1 TITL 1.2 NAM 1.3 STR | E AE | | ERS AND DIR | | |
| 12. OFFICE | RS AND DIRECTORS | 13. 1.1 TITL 1.2 NAM 1.3 STR | E ME FET ADDRESS 7-ST-ZIP | | ERS AND DIR | | |
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14. I do hereby 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 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 accument with an address.

SIGNATURE

SIGNATED AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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