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Jun 17 1998 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Senate B. Martham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000067074 (3)
1. Corporation Name
INTELLIGENT SYSTEMS FOR INDUSTRY, INC.

Principal Place of Business Mailing Address
~~8001 CORPORATE DR.~~ ~~BOCA RATON FL 33481~~ ~~P.O. BOX 81-1284~~ ~~BOCA RATON FL 33481-1284~~ **✓ CORRECT**
409 W HALLANDALE BOCA BLVD #415
HALLANDALE FL 33009

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3a. Mailing Address
31 409 W HALLANDALE RD. 36 P.O. Box 81-1284
Suite, Apt. #, etc. Suite, Apt. #, etc.
32 #415 37
City & State City & State
33 HALLANDALE FL 36 Boca Raton, FL
Zip Zip
34 33009 35 USA 38 33481 39 USA

3. Date incorporated or Qualified 09/27/1993
4. FEI Number 65-0438784 Applied For Not Applicable
5. Certificate of Status Desired ☐ \$5.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 ☒ Yes ☐ No

8. Name and Address of Current Registered Agent
SCHNEIDER, HARVEY R.
1900 CORPORATE BLVD
SUITE 301 WEST BUILDING
BOCA RATON FL 33431

10. Name and Address of New Registered Agent
91 Name ERNEST L. ROLLS
92 Street Address (P.O. Box Number is Not Acceptable) 5760 N.W. 22 AVE.
93
94 City Boca Raton, FL 95 Zip Code 33496

11. Pursuant to the provisions of Sections 807.0502 and 807.1506, 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 807.1506, Florida Statutes.

SIGNATURE *[Signature]* DATE 05-10-98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	TITLE	NAME
1	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY, ST, ZIP	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY, ST, ZIP	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY, ST, ZIP
2	21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY, ST, ZIP	21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY, ST, ZIP	21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY, ST, ZIP
3	31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY, ST, ZIP	31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY, ST, ZIP	31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY, ST, ZIP
4	41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY, ST, ZIP	41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY, ST, ZIP	41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY, ST, ZIP
5	51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY, ST, ZIP	51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY, ST, ZIP	51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY, ST, ZIP
6	61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY, ST, ZIP	61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY, ST, ZIP	61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY, ST, ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 807, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, on an attachment with an address.

SIGNATURE: *[Signature]* DATE 4/27/98 561-9958540
[Signature] DATE 5/20/98
[Signature] DATE 6/10/98