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PROFIT CORPORATION ANNUAL REPORT

1997

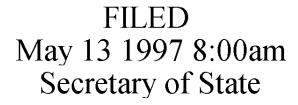


Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9300086491 (6)

INVESTMENT FINANCIAL SERVICES, INC.





Principal Place of Business 8732 WILDERNESSW WAY CORAL SPRINGS FL 33065			Mailing Address								
			3732 WILDERNESSW WAY CORAL SPRINGS FL 33065-6044								
							3. Date Incorporated or Qualified 12/13/1993	1 '	e of Last 1/1996	Report	
2. Principal Pl	ace of Business	28	. Mailing Address			** * *	4. FEI Number	. 1]/	applied For	
21			26				65-0459889		1	lot Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				- Cariffeeta of Clatus Decised	\$8.75 Additional			
22			27				5. Certificate of Status Desired	LJ	Fee F	Pequired	
City & State			City & State				6. Election Campaign Financing	\$5.00 May Be			
23		28					Trust Fund Contribution		Addo	to Fees	
Zip	Zip Country		Zip Co.				8. This corporation has liability for i	ntangible t	ax undor	s. 199.032,	
24	25 29 30			30							
	g. Name and Address of Curre	nt Regi	stered Agent				10. Name and Address of New Re	gistered A	gent		
DICK	ENSON, DAVID B			81	l Nar	ne					
980 N. FEDERAL HWY					Stro	ed Addr	Address (P.O. Box Number is Not Acceptable)				
SUITE 410			82 Street Ad			AST FREEZE	CES (1.0. DON HOLLING)	,			
	A RATON FL 33432			83	3						
	, , , , , , , , , , , , , , , , , , , ,			-					Teel 3	0+4	
			•	84	City	•		FL	85 Z ₁	Code	
SIGNATURE	egistered agent, or both, in the State m familiar with, and accept the oblig Stonature, tyred or printed have of registered as						oration submits this statement for the p ion's board of directors. I hereby accep ed when revisating:	ot the appo	intment a	s registered	
12.	OFFICERS AN			13.			ADDITIONS/CHANGES TO OFFIC	ER\$ AND	DIRECTO	RS IN 12	
TITLE	D		☐ DELETE	1 1 100		T			Change		
NAME	DICKENSON, DAVID B			1.2 NAME							
STREET ADDRESS	980 N. FEDERAL HWY, SUITE	410		1.3 \$1HFE		88					
CITY-ST-ZIP	BOCA RATON FL 33432			1.4 CITY -							
TITLE	Р		DELETE	2 1 TITLE	31 [11				Change	Addition	
NAME	SKRABONJA, GEORGE Z		till better	2.2 NAME				'			
STREET ADDRESS	2550 N.W. 59TH ST.			2.3 S1RE		00					
	BOCA RATON FL					33					
CITY-ST-ZIP TITLE	BOOK MATORIL		DELETE	2. 4 CITY 3.1 TITLE	. 21 - 711				Change	Addition	
				3.2 NAME		}		. ,			
NAME .				3.3 STREE							
STREET ADDRESS						20					
CITY-ST-ZIP			DELETE	3.4 CITY 4.1 TITLE	· S1-71P	· 			Change	Addition	
TITLE			LJ parett		c				criariy:	L. Haymon	
NAME				4. 2 NAM							
STREET ADDRESS				4.3 \$TRH		22					
CITY-ST-ZIP			DELFTE	4 4 Cily-	S1 - ZIP				Change	Addition	
TITLE			LJ DELLIE	5 1 1/1Lf				ı	The cuantit	□ Monition	
NAME				5.2 NAME							
STREET ADDRESS				53 S1HH		SS					
CITY - ST - ZIP			D.E. ETC	5 4 CITY-					<u> </u>		
TITLE			☐ DELFTE	61 THLE					Change	L. Addition	
NAME				6.2 NAME							
STREET ADDRESS				6 3 STRE	EL ADDRE	SS					
CfTY-ST-ZIP		·		6.4 C/TY	ST-7(P						

14. I do hereby certify that the information supplied with this fiting 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 open attachment with an address.