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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000022830 (1)

INTERNATIONAL MANAGEMENT SOLUTIONS, INC.

4720 LITTLE JOHN TRAIL SARASOTA EL 34232

Principal Place of Business

Mailing Address

4720 LITTLE JOHN TRAIL SARASOTA FL 34232-2629

FILED Jan 29 1997 8:00am Secretary of State



WILLIAM IN THE	V-12-12	•						
							3. Date Incorporated or Qualified 03/24/1994 3a. Date of Last Report 03/19/1996	
2. Principal Place of Business 2a. Mailing Add				ldress			4. FEI Number Applied For	
21 26							65-0483097 Not Applicable	
Suite, Apt. #. etc.			Suite, Apt. #, etc.				Certificate of Status Desired Sa.75 Additional Fee Required	
22 27 City & State City & State			ty & State				6. Election Campaign Financing \$5.00 May Be	
23		28					Trust Fund Contribution Added to Fees	
Zip	Country	Zış	þ	Cou	intry		8. This corporation has liability for intangible tax under s. 199.032,	
24	25	29		30			Florida Statutes Yes No	
	9. Name and Address of Curre		ed Agent	.4	· · · · · ·		10. Name and Address of New Registered Agent	
INGE	RASSIA, FRANK J				81	Name		
4720 LITTLE JOHN TRAIL SARASOTA FL 34232					82 Street Address (P.O. Box Number is Not Acceptable)			
					83			
					-			
					84	City	FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 607 050	02 and 607.	1508. Florida Statu	tes, the a	bove	e-named cor	rporation submits this statement for the purpose of changing its registered	
office or r agent 1 a	egistered agent, or both, in the State im familiar with, and accept the oblig	e of Florida. gations of, Se	Such change was ection 607.0505, Fl	authorize orida Sta	d by tutes	the corpora 3.	ation's board of directors. I hereby accept the appointment as registered	
SIGNATURE	Signature: typed or product name of registered ag	para and title if ap	oplicable (NO	TE Rogistere	d Age	int signature requ	uired when reinstating) DATE	
12.	OFFICERS AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TETLE	PCD		□ DELETE	1.1 7	ITLE		Change Addition	
NAME	INGRASSIA, FRANK J			1.2 N	AME			
STREET ADDRESS	4720 LITTLE JOHN TRAIL			1,3 S	TREET	ADDRESS		
CITY-ST-Z#	SARASOTA FL			140	uTY-S	T - ZIP		
TITLE	D		DELETE	2.1 T		· · · · · · · · · · · · · · · · · · ·	Change Addition	
NAME	DESOFI, OLIVER J.			22 N	LAME			
STREET ADDRESS	5101 ESTATES CIR					ADDRESS		
•	SARASOTA FL						200 mm - 100	
CITY-ST-ZIF					2 4 CITY-ST-ZIP 3 1 TITLE		Change Addition	
TRILE	D DALII A		Land December				hand wronger hand internet	
NAME	TURNER, PAUL A.			3.2 N				
STREET ADDRESS	201 MISTY DAWN LANE					ADDRESS		
CITY - ST - ZIP	CHARLOTTE NC		T or ere			ST-ZIP	C Channe T 4 ddillar	
TITLE			DELETE	4.1 T			☐ Change ☐ Addition	
NAME				4. 2	NAME			
STREET ADDRESS				4.3 \$	TREET	ADORESS		
CITY - ST - 7IP				4.4 (HTY-S	ST-21P		
THTLE			DELETE	5.1 1	ITLE		Change Addition	
NAME				5.2 k	IAME			
STREET ADDRESS				5.3 9	STREET	ADDRESS		
CITY - ST - 7IP						ST - ZIP		
TITLE			DELETE	6.11		, <u>1</u> , 1	Change Addition	
					NAME			
NAME						ADODECO		
STREET ADDRESS						ADDRESS		
CITY-ST-ZIF	the partiful that the information outside	1 - 24 - 25	40			ST-2IP	ed in Section 119 07(3V). Florida Statutes I buther certify that the	

i. I do nereby certify that the information supplied with this filling 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 thor 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 12 if changed, or pn agrattachment with an address.

SIGNATURE

ATURE AND TYPING OF PHINTED PAME OF SIGNING OFFICER OF DIRECTOR

1-23-97

941/371-1930