Mailing Address

3000 NE 30TH PLACE

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P94000039606**

1. Corporation Name

CITY-ST-ZIP

Principal Place of Business 3000 NE 30TH PLACE

INTERNATIONAL BOILER, INC.

Suite 109 Ft. Lauderdale Fl. 33306			Suite 109 Ft. Lauderdale FL 33306					DO NOT WRITE IN THIS SPACE				
JS			US					3. Date Incorporated or Qualifed				
								}	05/23/1994			}
2. Principal Place of Business			2a. Mailing Address					4. FEI Number		$- \top \top$	Applied For	
21			26					65-0490091			Not Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.							\$8.75	Additional	
22			27					5. Certifcate of Status Desired			Required	
City & State			City & State					6. Election Campaign Financing		\$5.0	0 мау Ве	
23			28				- !	Trust Fund Contribution		•	d to Fees	
Zip Country			Zip Country					8. This corporation owes the cu	rrent vear Int	angible		
24	25	30			ļ	Personal Property Tax.						
		dress of Current		stered Agent	1001				10. Name and Address of New	Registered	Agent	
			-			81	Name					
CT CORPORATION SYSTEM												
% CT CORPORATION SYSTEM				ľ			82 Street Address (P.O. Box Number is Not Acceptable)					
1200 S. PINE ISLAND DR.				· ·								<u></u>
PLANTATION FL 33324												
						84	City			FL	85 Zij	o Code
11. Pursuant	to the provisions of S	Sections 607.0502	and 6	07.1508, Florida	Statutes, th	ne above	-named	corpora	tion submits this statement for th	e purpose of	changing i	ts registered
office or r	egistered agent, or b	onth in the State of	f Florid	da. Such change	was author	rized by	the corpo	oration's	board of directors. I hereby according	ept the appoi	ntment as	registered
agent, i a	m familiar with, and	accept the obligation	ons or	, Section 607.030	Jo, Florida .	Statutes.						
SIGNATURE	Signature, typed or printed	name of recustered enent	and title	if applicable	(NOTE: Regis	stered Agen	sionature c	required wh	en reinstating)	DATE		—— l
12. OFFICERS ANI									ADDITIONS/CHANGES TO O	FFICERS AN	D DIREC	TORS IN 12
TITLE	P			DELE		1.1 TITLE		Τ			[] Chang	
NAME	BEALS, MARY M					1.2 NAME						1
	5131 NE 26TH A	/ENITE				1.3 STREET	ADDDEEG					
	l							'				
CITY-ST-ZIP	FT. LAUDERDALE	FL		DELE		1.4 CITY-ST 2.1 TITLE	-ZIP	┼	-		[] Chang	e
TITLE	VP										[_] Onlaring	
NAMÉ	BEALS, JEFFREY					2.2 NAME						ł
STREET ADDRESS	5131 NE 26TH A					2.3 STREET	ADDRESS	;				1
CITY-ST-ZIP	FT. LAUDERDALE	FL				2. 4 C/TY-S	T-ZIP	<u> </u>				
TITLE				☐ DELE	TE	3.1 TITLE					Change	e
NAME					I.	3.2 NAME						
STREET ADDRESS						3.3 STREET	ADDRESS	;]
CITY-ST-ZIP						3.4. C/TY-S	T-ZIP	1				
TITLE				☐ DELE	ETE	4.1 TITLE					[] Chang	e Addition
NAME						4. 2 NAME						Ì
STREET ADDRESS	Ì				▋.	4.3 STREET	ADDRESS					į
CITY-ST-ZIP						4.4 CITY-S1						ļ
TITLE				☐ DELE		5.1 TITLE		1			Chang	e Addition
NAME						5.2 NAME					•	
						5.3 STREET	ADDRESS	;				Ì
STREET ADDRESS						5.4 CITY-S1						1
CITY-ST-ZIP	 			☐ DELE		6.1 TITLE	- mall'	+	 		[] Chang	e Addition
TITLE	ļ			L.J UELO		6.2 NAME					C) onarig	- Lindanion
NAME	Į.											Į
STREET ADDRESS	I					6.3 STREET	AUDRESS	i				

6.4 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)(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 attachment with an address, with all other like empowered. SIGNATURE:

954-537-7787 Davime Phone #

May 08, 1999 8:00 am Secretary of State

05-08-1999 90070 008 ***150.00