## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

## P94000047521 (7) DOCUMENT # 1. Corporation Name

INTERNATIONAL PRODUCT SOURCE, INC.

**FILED** May 01 1996 8:00 am Secretary of State



Principal Place	of Business	Mailing Address			i matsı matılı gəlisi dəliis alialı fidəbi bitim bilədi biləd	
3050 BISGAY MIAMI FL 33	YNE BLVD SUITE 700 1137	3050 BISCAYNE BLV MIAMI FL 33137	D SUITE 700			
				3. Date Incorporated or Q 06/23/1994	ualified 3a. Date of Last Report 10/03/1995	
p		2s. Mailing Address		4. FEI Number 65-05 19892	Applied For	
Suite, Ant. #, etc.		26			Not Applicable	
22 City & State		Suite, Apt. #, etc.	27		sired S8.75 Additional Fee Required	
23		City & State			6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees	
Zip	Country	Ζφ	Country	8. This corporation has lia	bility for intangine tax under s. 199.032,	
24	25	[29]	30	Florida Statutes	Yes No	
<u> </u>	9, Name and Address of Cui	rrent Hegistered Agent	81	10. Name and Address o	f New Registered Agent	
- CHACH	TEN-HAN T		1 1	Name David S. Marki	o, Esa.	
2003 S BAYSHORE DR				Street Address (P.O. Box Number is Not Acceptable One Biscayne Tower, Suik 2600		
-8UTE 1100-						
MIAMI F				2 S. Biscayne B	ivit.	
				<sup>City</sup> Miami	FL 85 Zip Code 331 31	
11. Pursuant to	o the provisions of Sections 607.0	502 and 607.1508, Florida Statu	tes, the above-nan	ned corporation submits this statement fo		
familiar with	h, and accept the obligations of, S	Section 607.05.5, Florida Statute	<b>zeo</b> by the corpora <b>s.</b>	ation's board of directors. Thereby accept	the appointment as registered agent. Fam	
SIGNATURE _					4/29/96	
<b>√</b> 2.	Signature, typod or printed name of registered a			gnature regulactiwhen renstating)	CATE (	
TITLE	P	AND DIRECTORS	13, 1, 1 TITLE	ADDITIONS/CHANGES	TO OFFICERS AND DIPECTORS IN 12 Change 1 Addition	
NAME	MCDONALD, MATTHEW	La carrie	1.2 NAME	Callainche Tresan		
STREET ADDRESS	DOEG BICCAVNE BLVD. OLUTE TO			1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-S1-ZIP  Migmi, 7L 33137		
CHY-ST-ZIP	MIAMI FL 33137	/	1.4 CITY - S1 - Z	P Minni 7 3313	7	
TITLE	\$	DELETE	2. 1 TITLE	617	[D Change   Addition	
NAME	TIFFANY, SUSAN		2.2 NAME	Delletier Miles		
STREET ADDRESS	3050 BISCAYNE BLVD S	UITE 701	2.3 STREET ADD	Pelktier, Mike 3050 Biscayne Bin Miami, 71. 3313	d #700	
CiTY - S1 - ZiP	MIAMI FL 33137		2.4 CITY - S1 - ZI	Minusi 21, 3313	1	
TITLE		DELETE	3. 1 11TEE		Change Addition	
NAME (			3 2 NAME			
STREET ADDRESS			3.3. STREET ADI	DRESS		
CITY-ST-ZIP TITLE		F Britis	3.4 CITY - ST - 7	IP	· · · · · · · · · · · · · · · · · · ·	
NAME.		☐ DELETE	4. 1 TITLE	•	Change Addition	
STREET ADDRESS			4.2 NAME	205.00	1	
CITY-ST-ZIP			4.3 STREET ADD			
THEF		☐ DELETE	4.4 CITY - \$1 - 21 5. 1 TITLE	<u>"</u>	-01016026 Change	
NAME			5.2 NAME	705/23/96 -	-01016026 <sup>Change</sup> Addition	
STREET ADDRESS			5.3 STREET ADD	****ZUU, UU		
CITY-ST-ZIP			5.4 CITY+SI-ZI			
TITLE		DEVETE	6 1 TITLE		Change Addition	
NAME			62 NAME			
STREET ADDRESS			63 STREFT ADD	DRESS	01 - 01	
CITY-ST-ZIF			6.4 CITY- ST- Z		5-1-96 OX	
<ol><li>14. I do hereby</li></ol>	certify that the information supplied	ed with this filing is voluntarily furn	alshed and does no	of qualify for the exemption stated in Sect	on 119 07/3)(k) Florida Statutos 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 early, 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.

SIGNATURE:

305/573.2900