

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

FILED
May 08 1998 8:00am
Secretary of State

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| PROFIT CORPORATION ANNUAL REPORT 1998 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
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DOCUMENT # P94000077282 (9)
1. Corporation Name
INTERNATIONAL DESIGN ENGINEERING AND SERVICES, I
NC.


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| Principal Place of Business 3920 RIVERLAND RD. FT. LAUDERDALE FL 33312 | Mailing Address 3920 RIVERLAND RD. FT. LAUDERDALE FL 33312 |
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DO NOT WRITE IN THIS SPACE

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| 2. Principal Place of Business 21 3920 Riverland Rd. Suite, Apt. #, etc. | | 2a. Mailing Address 26 3920 Riverland Rd. Suite, Apt. #, etc. | | 3. Date Incorporated or Qualified 10/19/1994 | |
| 22 City & State 23 Ft. Lauderdale, Fl. | | 27 City & State 28 Ft. Lauderdale, Fl. | | 4. FEI Number 65-0528762 | |
| 24 33312 | | 29 33312 | | 5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required | |
| 25 U.S.A. | | 30 U.S.A. | | 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees | |
| | | | | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |

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| 9. Name and Address of Current Registered Agent SCHNITZER, GERALD S 2455 S SUNRISE BLVD 502 FT LAUDERDALE FL 33304 | | 10. Name and Address of New Registered Agent 81 Name John Gandia 82 Street Address (P.O. Box Number is Not Acceptable) 3920 Riverland Rd. 83 84 City Ft. Lauderdale, Fl. FL 85 Zip Code 33312 | |
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE  DATE 4/27/98
(NOTE: Registered Agent signature required when reinstating)

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| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PS SCHNITZER, GERALD S 2455 E SUNRISE BLVD FT LAUDERDALE FL <input type="checkbox"/> DELETE | 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP | President John Gandia 3920 Riverland Rd. Ft. Lauderdale, Fl. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DS PEARSON, GEORGE W 2121 SW 52ND AVE PLANTATION FL <input type="checkbox"/> DELETE | 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP | Treasurer George W. Pearson 2121 SW 52nd Ave. Plantation, Fl. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> DELETE | 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP | Secretary Anne M. Berube 3920 Riverland Rd. Ft. Lauderdale, Fl. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> DELETE | 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> DELETE | 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> DELETE | 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

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.

SIGNATURE:  DATE 4/27/98
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone # 0282834

CR2E034 (10/97)