

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Murtham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P94000081208 (8)

1. Corporation Name

INTERNATIONAL SYSTEMS SERVICES, INC.



Principal Place of Business

2325 NORTHWEST 30 PLACE  
POMPANO BEACH FL 33069

Mailing Address

2325 NORTHWEST 30 PLACE  
POMPANO BEACH FL 33069

3. Date Incorporated or Qualified  
11/04/1994

3a. Date of Last Report  
04/14/1995

2. Principal Place of Business

2a. Mailing Address

21 500 Fairway Drive

26 Suite, Apt. #, etc.

22 Suite 103

27 Suite, Apt. #, etc.

23 Deerfield Beach, FL

28 City & State

24 33441

25 Broward

29 Zip

30 Country

4. FET Number  
65-0533654

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

AMERILAWYER  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 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

Signature, typed or printed name of registered agent and the corporation

(If the Registered Agent signature is used when incorporating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
P  
RODRIGUEZ, JUAN R  
2325 NORTHWEST 30 PLACE  
POMPANO BEACH FL 33069

1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

5. TITLE  
6. NAME  
7. STREET ADDRESS  
8. CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

9. TITLE  
10. NAME  
11. STREET ADDRESS  
12. CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

13. TITLE  
14. NAME  
15. STREET ADDRESS  
16. CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

17. TITLE  
18. NAME  
19. STREET ADDRESS  
20. CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

21. TITLE  
22. NAME  
23. STREET ADDRESS  
24. CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-11-96

Date

954-425-0018

Daytime Phone #

CR2E034 (12/95)