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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000084198 (8)

INTELISYS TECHNOLOGIES, INC.

Principal Place of Business

Mailing Address

FILED May 14 1998 8:00am Secretary of State



P.O. BOX 565148 MIAMN FL 33256		P.O. BOX 565148 MIAMI FL 33256			DO NOT WRITE II	N THIS SPA	ACE				
						3. Date Incorporated or Qualified 11/15/1994					
	ace of Business	2a. Mailing Address				4. FEI Number		A	pplied For		
21		26				65-0546838		N	ot Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	! —¬			5. Certificate of Status Desired		\$8.75 Additional Fee Required			
City & State		Cily & State				Election Campaign Financing Trust Fund Contribution			May Be to Fees		
Zip 24	Country 25	Zip 29	30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No					
9, Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent						
RASSNER, WAYNE				11 Nan	ne						
	00 8 W 62ND AVE A ZÁ 7 000-PH-B		82 Stre		et Addre	ss (P.O. Box Number is Not Acceptable))				
SI	AIAMI FL 33143		8	3							
			8	4 City	'		FL	85 Zip	Code		
11, Pursuant t office or re agent. I ar	o the provisions of Sections 607.050 agistered agent, or both, in the State in familiar with, and accept the oblig.	2 and 607.1508, Florida Statut of Florida. Such change was ations of, Section 607.0505, FI	tes, the abo authorized orida Statut	ve-nam by the c	ed corpo corporatio	oration submits this statement for the pu on's board of directors. I hereby accept	rpose of cl the appoir	anging i tment as	its registered s registered		
SIGNATURE											
	Signature, typed or printed name of registered ago			gent signa	iture required	d when reinstating)	DATE		00.10.10		
12.	OFFICERS AN	D DIRECTORS \$\frac{1}{2}.0\text{0ELETE}\$	13. 1.1 TOL		1 6	ADDITIONS/CHANGES TO OFFICE		Change	RS IN 12 Addition		
TITLE	HUSSAINI, MARTHA W	₩. octete			1 1	DIGHT MANTHA D	<u>ئ</u> ر	r Cuange	L. AUGILION		
NAME	11541 SW 98TH COURT		1.2 NAM		" N	CUI CUI OPOL	`				
STREET ADDRESS	MIAMI FL 33176			ET ADDRES	>> ``	IRIGHT, MARTHA R 541 SW98CT. MIAML, FL. 33176					
CITY-ST-ZIP	VSTD	DELETE	2.1 TITL	-\$1-2 P		MIAMU, FL. 351 16	,	Change	Addition		
NAME	HUSSAINI, CHRISTOPHER		2.2 NAM				_				
STREET ADDRESS	11541 S.W. 98TH COURT			et addres	se						
CITY-ST-ZIP	MIAMI FL 33176			/- SF+ ZIP	~						
TITLE		DELETE	3.1 TITL				L	Change	Addition		
NAME			3.2 NAM	ΙE							
STREET ADDRESS			3.3 STA	ET ADDRES	ss						
CITY-ST-ZIP			3.4. CITY	(-ST-ZIP							
TALE		☐ DELETE	4.1 TITL	F				Change	☐ Addition		
NAME			4. 2 NAM	ME					İ		
STREET ADDRESS			4.3 STRE	ET ADDRES	ss						
CITY+ST-ZIP			4.4 CITY	-S1-7IP							
TITLE		☐ DELETE	5.1 TITL	E				Change	Addition		
NAME			5.2 NAM	E							
STREET ADORESS			5.3 STRE	ET ADDRES	ss						
CITY-ST-ZIP	<u> </u>		5.4 CITY	- S1 - ZIP				•			
TITLE		☐ DELETE	6.1 TITL	E			L	Change	Addition		
NAME			6.2 NAM	E							
STREET ADDRESS			6.3 STRE	ET ADDRES	ss						
CITY-ST-ZIP			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.