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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 21 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000011321 (3)

INTERNATIONAL SALES GROUP/1500 OCEAN, INC.

Principa: Place of Business 5161 COLLINS AVENUE 408 MIAMI BEACH FL 33140 US		Mailing Address 5161 COLUNS AVENUE 408 MIAMI BEACH FL 33140-2718 US			
				3. Date incorporated or Qualified 02/08/1995	3a. Date of Last Report 06/27/1996
د رزاسے 🚞	lace of Business AUL	2a. Mailing Address 26 5/6/ Callin	s AIR	4, FEI Number 65-0574749	Applied For
21 <i>3/0/</i> Suite, Apt	SYIII TO THE	Suite, Apt. #, etc.			Not Applicable \$8.75 Additional
22 # /-	08	27 #408		5. Certificate of Status Desired	Fee Required
City & Stat 23 / Ma	mi Beach, FL	28 Miami Ba		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
a 29 337	140 25 USA	29 33/4()	Country 30 USA	8. This corporation has liability for in Florida Statutes	ntangible tax under s. 199.032, Lyes
-1 00.	g. Name and Address of Curre		301 2071	10. Name and Address of New Reg	
	ODNY, MICHAEL		81 Name		1
2000 W COMMERCIAL BOULEVARD			82 Street Address (P.O. Box Number is Not Acceptable)		
	re 232 Lauderdale FL 33309		83		
rı.	LAUDENDALE PL 33308		<u> </u>		· · · · · · · · · · · · · · · · · · ·
			84 City	•	FL 85 Zip Code
SIGNATURE	m familiar with, and accept the oblig	gent and title if applicable. (NOTE	ricia Statutes. : Regislered Agent agneture rec	quired when reinstating)	DATE
12.	OFFICERS AN	ND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFIC	
TITLE NAME	SPIEGELMAN, PHILLIP	C) occeit	1.1 TITLE 1.2 NAME		Change Additio
STREET ADDRESS	5161 COLLINS AVENUE, 408		1.3 STREET ADORESS		
CITY - ST - ZIP	MIAMI BEACH FL		1.4 CITY-ST-ZIP		
MLE	VP	☐ DELETE	2.1 TITLE		Change Additio
NAME	STUDNICKY, CRAIG 5161 COLLINS AVENUE 408		2.2 NAME		
STREET ADDRESS DITY - ST - ZIP	MIAMI BEACH FL		2.3 STREET ADDRESS		
ITLE TILE	MINNI DENOTE LE	DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		☐ Change ☐ Additio
IAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
DITY-ST-ZIP		- Include	3.4. CITY-ST-ZIP		
IILE MANG		☐ DELETE	4.1 TITLE		L Change L Additio
IAME STREET ADDRESS			4. 2 NAME 4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
IIILE		☐ DELETE	5 1 TITLE		Change Additio
KAME			52 NAME		
TREET ADDRESS			5.3 STREET ADDRESS	•	
DITY-ST-7-P		I DELETE	5.4 City-St-ZiP		
ITLE		DELETE	61 TITLE 62 NAME		Change Additio
NAME STREET ADDRESS			6 3 STREET ADDRESS		
CHTY-ST-ZIP	(1 A	~	6 4 City-St-ZiP		
14. I do here		ed with his file o does not qualify	y for the exemption stat	ed in Section 119.07(3)(i), Florida Statutes	. I further certify that the
I am an o' appears i	on indicated in this annual regard or fficer or director of the completion on Block 12 o Block 11 Jhanged	named and a second of the seco		at my signature shall have the same legal ort as required by Chapter 607, Florida St	and the same of th
	URE:/_	X // /V/			