

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

FILED

Apr 21 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000012147 (1)

1. Corporation Name

INTERNATIONAL SALES GROUP, INC



Principal Place of Business 5161 COLLINS AVENUE #408 MIAMI BEACH FL 33140 US		Mailing Address 5161 COLLINS AVENUE 408 MIAMI BEACH FL 33140-2718 US		3. Date Incorporated or Qualified 02/10/1995		3a. Date of Last Report 06/27/1996	
2. Principal Place of Business 21 5161 Collins Ave Suite, Apt. #, etc. 22 #408 City & State 23 Miami Beach, FL Zip 24 33140 Country 25 USA		2a. Mailing Address 26 5161 Collins Ave. Suite, Apt. #, etc. 27 #408 City & State 28 Miami Beach, FL Zip 29 33140 Country 30 USA		4. FEI Number 65-0574744		Applied For Not Applicable	
9. Name and Address of Current Registered Agent COLODNY, MICHAEL 2000 WEST COMMERCIAL BOULEVARD SUITE 232 FT. LAUDERDALE FL 33309		10. Name and Address of New Registered Agent		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees			
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 title if applicable (NOTE: Registered Agent signature required when reinstating)		DATE			
				12. OFFICERS AND DIRECTORS			
				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
				14. I do 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 attached sheet with my address.			

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	
NAME	SPIEGELMAN, PHILIP J	1.2 NAME	
STREET ADDRESS	5161 COLLINS AVE 408	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI BEACH FL 33140	1.4 CITY-ST-ZIP	
TITLE	VP	2.1 TITLE	
NAME	STUDNICKY, CRAIG	2.2 NAME	
STREET ADDRESS	5161 COLLINS AVE 408	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI BEACH FL 33140	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0192916

305-866-1333

CR2E034 (9/96)