

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

FILED

Mar 11 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam 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 AVE
#408
MIAMI BCH FL 33140
US

Mailing Address

5161 COLLINS AVE
#408
MIAMI BCH FL 33140
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/10/1995

4. FEI Number

65-0574744

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 3390 N.E. 190th St.

Suite, Apt. #, etc.

22

City & State

23 Aventura, Florida

Zip

24 33180

Country

25 USA

2a. Mailing Address

26 3390 N.E. 190th St.

Suite, Apt. #, etc.

27

City & State

28 Aventura, Florida

Zip

29 33180

Country

30 U.S.A.

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

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE

NAME
P SPIEGELMAN, PHILIP J
STREET ADDRESS
5161 COLLINS AVE 408
CITY-ST-ZIP
MIAMI BEACH FL 33140

1.2 NAME

TITLE
VP
NAME
STUDNICKY, CRAIG
STREET ADDRESS
5161 COLLINS AVE 408
CITY-ST-ZIP
MIAMI BEACH FL 33140

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

President
Spiegelman, Philip J.
3390 Northeast 190th Street
Aventura, Florida 33180

1.2 NAME

Vice President
Studnick, Craig
3390 Northeast 190th Street
Aventura, Florida 33180

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

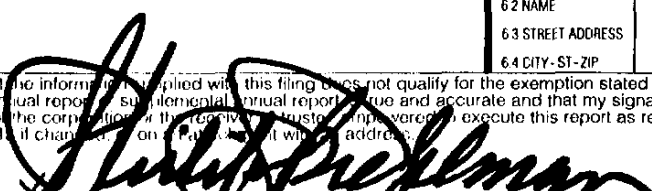
6.2 NAME

6.3 STREET ADDRESS

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, supplemental annual report, 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 registered agent, and that I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes; and that my name appears in Block 12 or Block 13 of this filing.

SIGNATURE:



2/16/98

305-931-6511

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