2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P95000012147

1. Entity Name
INTERNATIONAL SALES GROUP, INC

Principal Place of Business	Mailing Address
18753 BISCAYNE BLVD AVENTURA, FL 33180 US	18753 BISCAYNE BLVD AVENTURA, FL 33180 US

DO NOT WRITE IN THIS SPACE

04222004   No Chg-P   CR2E034 (10/03)

4. FEI Number		Applied For
65-0574744		Not Applicable

5. Certificate of Status Desired   ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GANET, STACI H ESQ
2875 NE 191ST ST.
SUITE 500
AVENTURA, FL 33180

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00 **After May 1, 2004 Fee will be $550.00**	9. Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	

10.	OFFICERS AND DIRECTORS	
TITLE	P	
NAME	SPIEGELMAN, PHILIP J	
STREET ADDRESS	18753 BISCAYNE BLVD	
CITY-ST-ZIP	AVENTURA, FL 33180	
TITLE	VP	
NAME	STUDNICKY, CRAIG	
STREET ADDRESS	18753 BISCYANE BLVD	
CITY-ST-ZIP	AVENTURA, FL 33180	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
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CITY-ST-ZIP		
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NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

DO NOT WRITE IN THIS SPACE

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _J. SPIEGELMAN_   4-22-04   305-931-6511

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #