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

PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP

STREET ADDRESS

Block 12 or Block 13 if changed, or on an attachment with an add

CITY-ST-ZIP

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #1. Corporation Name P95000041967 (7)

INTERNATIONAL BUSINESS ADVISORS, INC.

Principal Place of Business Mailing Address C/O MARIA CARMELA BREMMER C/O MARIA CARMELA BREMMER 1201 N. FEDERAL HWY. 1201 N. FEDERAL HWY. DO NOT WRITE IN THIS SPACE **DELRAY BEACH FL 33483** DELRAY BEACH FL 33483 3. Date Incorporated or Qualified 05/24/1995 2. Principal Place of Business 2a. Mailing Address Applied For 21 Not Applicable 26 65-0585392 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes □ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BREMMER, MARIA CARMELA 1201 N. FEDERAL HWY. 82 Street Address (P.O. Box Number is Not Acceptable) **DELRAY BEACH FL 33483** 83 84 City Zip Code FI 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent a gnature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TIDE NAME BREMMER, MARIA CARMELA 1.2 NAME CR2E034 1201 N. FEDERAL HWY. STREET ADDRESS 1.3 STREET ADDRESS **DELRAY BEACH FL 33483** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 THUE NAME BREMMER, KENNETH 2.2 NAME % 1201 N. FEDERAL HWY. STREET ADDRESS 2.3 STREET ADDRESS **DELRAY BEACH FL 33483** CITY-ST-7IP 2. 4 CITY - ST - ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 33 STREET ADDRESS CITY-ST-ZIP 3 4. C(TY - ST - Z(P DELETE ☐ Change Addition TITLE 4.1 TITLE NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE ☐ Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADORESS

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

6.4 C(TY - ST - Z(P

61 TITLE

6.2 NAME

DELETE

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 suppliemental annual report is true and accurate and that my signature shall have the same logal 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 1/14/98

***150.00

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Addition

FILED

Jan 28 1998 8:00am

Secretary of State