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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000045232 (2)

1031 EXCHANGE SERVICES, INC.

Principal Place of Business

1401 E. BROWARD BLVD. SUITE 208

FORT LAUDERDALE FL 33301

Mailing Address

P.O. BOX 11368

FORT LAUDERDALE FL 33339-1368

FILED Aug 06 1997 8:00am Secretary of State



					3. Date Incorporated or Qualified		
2. Principal P	iace of Business N. DIKE HWY	2a. Mailing Address N. 2	YXIE	Hwy	4. FEI Number 65-0592677	-	Applied For Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		······································	5. Certificate of Status Desired	, ,	75 Additional be Required
23 WILTON MANORS FO		28 WILTON MANORS FV		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip 33:	305 Country JSA	29 73 7350 J 30	Country	SA	8. This corporation has liability for Florida Statutes	intangible tay und	ler s. 199.032,
	9. Name and Address of Current				10. Name and Address of New Re	=	
MILLS, RICHARD A III 1401 E. BROWARD BLVD. SUITE 206 FORT LAUDERDALE FL 33301		Registered Agent	81	Name	LS, RICHARD A	TIL	
		Tem has see		82 Street Address (P.O. Box Number is Not Accompbile) BLU #30			
				2000	CHILGIPPIN	<u></u>	
	,, _ ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0,34	84	Carre		or l	Zin Gode 4
<u> </u>		~ 0	<u> </u>		LAUDERBLE	FL 85	33306
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		13.	ris signature require	ADDITIONS/CHANGES TO OFFIC		TORS IN 12
TITLE	D.	☐ DELETE	1.1 TITLE			☐ Cha	
NAME	YOHANAN, SAM		1.2 NAME				
STREET ADDRESS	3038 N. FEDERAL HWY BLDG L		1.3 STREET	ADDRESS			
CITY-ST-ZIP	FORT LAUDERDALE FL 33306		14 CITY-S	1-ZIP			
TITLE		☐ DELETE	2.1 TITLE	•		☐ Cha	nge 🔲 Addition
NAME			2 2 NAME				
STREET ADDRESS			2.3 STREET	ADDRESS			
CITY-ST-ZIP		Delete	2.4 CITY-5	ST - ZIP		П оь.	
TITLE		☐ DELETE	3.1 TITLE		• •	Cha	nge 🔲 Addition
NAME			3.2 NAME	IBBBCO			
STREET ADDRESS			3.3 STREET				
CITY-ST-ZIP TITLE		DELETE	3.4. CITY - 5 4.1 TITLE	SI-ZIP		Char	nge Addition
NAME		Special September 20	4. 2 NAME				
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CITY - S				
TITLE		☐ DELETE	5.1 TITLE			☐ Chai	nge 🔲 Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET	ADDRESS			i
CITY-ST-ZIP			5.4 CITY-S	T - 7IP			
TITLE		☐ DELETE	6.1 TITLE			☐ Chai	nge 🔲 Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET	ADDRESS			
CITY-ST-ZiP	and the state of t	30- 41-12 EV	6.4 CHY-S				4 4 4
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 is supplemental annual report is frue 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 attachment with an address.							