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 # P95000046395 (6)

INTEGRATED DELIVERY SYSTEMS INC.

Principal	Placa	٠f	Business
THICIPAL	IIDO	0	Drawn 1022

Mailing Address

P. O. BOX 52-6203

FILED Apr 29 1997 8:00am Secretary of State



MIAMI FL 33175	MIAMI FL 33152-6203			
	vo	•	3. Date Incorporated or Qualified 06/12/1995	3a. Date of Last Report 05/01/1996
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 7200 N.W. 19 ST	26		65-0613935	Not Applicable
Suite, Apt. #, etc. 22 SUITE 600	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23 MÍAMI, FL	28		Trust Fund Contribution	Added to Fees
Zip Country	Zip	Country	8. This corporation has liability for in	itangible tax under s. 199.032
24 33126 ₂₅ USA	29	30		Yes No
9. Name and Address of Curren	Registered Agent	B1 Name	10. Name and Address of New Reg	Istered Agent
GAZQUEZ, JESUS		100	CAPOHER TECHS	
13776 S.W. 21ST ST.		82 Street Ad	GAZQUEZJESUS dress (P.O. Box Number is Not Acceptable	e)
MIAMI FL 33175		1560 83	_S.W139_AVE	
•		83		
		84 City		85 Zip Code
			IAMI	FL 33184
11. Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State agent. I am familiar with and accept the obligations of the section o	and 607.1508 Florida Statute of Florida. Such change was a tions of Section 607.0505, Flo	es, the above-named co authorized by the corpor orida Statutes	orporation submits this statement for the puration's board of directors. I hereby accept	the appointment as registered
SIGNATURE Signature, typod or printed name of registered age:	7 15	US GAZ Hegistered Agent signature rec	QUEZ	04/02/97
12. OFFICERS AND	· · · · · · · · · · · · · · · · · · ·	13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	DELETE	1.1 TO LE	P	Change Addition
NAME JESUS GAZQUEZ		1.2 NAME	JESUS GAZQUEZ	75
STREET ADDRESS 13776 SW 21 ST		1.3 STREET ADDRESS	1560 S.W. 139 AVE	<u>ت</u> ا
CITY-ST-ZIP MIAMI FL		1.4 CITY - S1 - ZIP	MIAMI, FL 33184	
THILE SD	** DELETE	2.1 TITLE		Change Addition C
NAME MERCEDES PEREZ		2.2 NAME		
STREET ADDRESS 3734 NW 12 ST		2 3 STREET ADDRESS		
CITY-ST-ZIP MIAMI FL		2 4 CITY-S1-ZIP		
TITLE	☐ DELETE	311111		Change Addition
NAME		3 2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP	Drury	3.4. C(1Y - ST - Z(P)		Change Addition
THILE	☐ DELETE	4.1 TOLE		Change Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS	•	
CITY-ST-ZIP	DELETE	4.4 CiTY - \$1 - ZiP 5.1 TITLE		Change Addition
THTLE	LJ DELETE			Change C Auditori
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP	DELETE	5.4 CITY - \$1 - ZIP 6.1 TITLE		Change Addition
TITLE	☐ nercie			L_1 Griange L_1 Accident
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP	Lighth this filing deep 50 Atali	6.4 CHY-ST-7iP	led in Section 119.07/31/i) Florida Statutes	Lifurther certify that the

lowerilal annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name information indicated on this annual report or suppl I am an officer or director of the corporation or the appears in Block 12 or Block 13 if changed or on a