

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 29 1996 8:00 am
Secretary of State

DOCUMENT # P95000053330 (3)
1. Corporation Name

ISGP, INC.

Principal Place of Business Mailing Address
% JOSEPH M. HOVLAND
11983 NORTH TAMiami TRAIL, SUITE 100
NAPLES FL 33963
% JOSEPH M. HOVLAND
11983 NORTH TAMiami TRAIL, SUITE 100
NAPLES FL 33963

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip 29 Country 30 Country
24 25 29 30

3. Date Incorporated or Qualified 3a. Date of Last Report
07/11/1995
4. FEI Number Applied For
65-0609986 Not Applicable
5. Certificate of Status Desired \$8.75 Additional
Fee Required
6. Election Campaign Financing \$5.00 May Be
Trust Fund Contribution Added to Fees
8. This corporation has liability for intangible tax under s. 199.03?
Florida Statutes Yes No

9. Name and Address of Current Registered Agent
VOGEL, JAMES D
3936 NORTH TAMiami TRAIL
SUITE B
NAPLES FL 33940
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 date if applicable) (Date) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY - ST - ZIP
PD HOVLAND, JOSEPH M 11983 TAMiami TRAIL NORTH NAPLES FL 33963
VD CARMOSINO, JOSEPH M 3300 GULF SHORE BLVD., N., #405 NAPLES FL 33940
TD MILLER, FORREST 649 BEACHWALK CIRCLE, SUITE 101 NAPLES FL 33963
SD MOAVENI, KHOSROW 3936 TAMiami TRAIL NORTH, SUITE B NAPLES FL 33940
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE 1.2 NAME 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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: [Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7.19.96 9415947777
Date Date