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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000071040 (6)

INVESTMENT CORPORATION OF NORTH AMERICA

FILED Jan 26 1998 8:00am Secretary of State



Principal Place	o Di Business	Mailing Address				
741 S.W. 75TH PLANTATTION		741 S.W. 75TH TERRACE PLANTATTION FL 33317				
· – · · · · · · · · · · · · · · · · ·					DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
					09/11/1995	
2. Principal Pla	ace of Business	2a. Mailing Address				
21		26			65-0749369 Not Applic	
Sulte, Apt. 1	#, etc.	Suite, Apt. #, etc.			S8.75 Additions	
22		27			I & Certificate of Status Desired I I	
City & State)	City & State	Same Do Not Write In this space Do Not Write In this space			
23		28				
Zip	Country	Zip	Country	,		
24	25	- 	 1	•		
	9. Name and Address of Currer		301			
1114			81	Name		
	GEN, KEVIN L		112			
3990 SHERIDAN STREET			82	Street Ac	ddress (P.O. Box Number is Not Acceptable)	
	TE 104			<u> </u>		
HOL	LLYWOOD FL 33021		183			
			84	City	85 Zin Code	
			"	J., ,	FL V	
office or re	o the provisions of Sections 607,050 egistered agent, or both, in the State in familiar with, and accept the obliging.	e of Florida. Such change was au	uthorized b	y the corpo	orporation submits this statement for the purpose of changing its register oration's board of directors. I hereby accept the appointment as registers	
SIGNATURE	Signature, typed or printed name of registered ag-		Registered Ag	ani signaturo rei	aquired when reinstating) DATF	
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTVS	☐ DELETE	1.1 TITLE		Change Add	
NAME	KAUFMAN, RICHARD B		1.2 NAME	ì		
STREET ADDRESS	741 S.W. 75TH TERRACE		1.3 STREE	ADDRESS		
CITY-ST-ZIP	PLANTATTION FL 33317		1.4 CITY - 9	17-21P		
TITLE	D	DELETE			Change Add	
NAME	KAUFMAN, RICHARD B		22 NAME			
STREET ADDRESS	741 S.W. 75TH TERRACE		1	ADDOCCC		
	PLANTATTION FL 33317				•	
CITY-ST-ZIP TITLE	TEATHATTON TE SOOT	DELETE		S1 - ZIP	Channe Add	
		C. Bette			Culturge C Aud	
NAME			1			
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CITY-ST-ZIP			-	ST - ZIP		
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NAME			4 2 NAME	ļ		
STREET ADDRESS			4.3 STREFT	ADDRESS		
CITY-ST-ZIP			4.4 CiTY - 9	ST - 21P		
TITLE		☐ DELETE	5.1 TITLE	- 1	Change Add	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP						
TITLE		DELETE		-	. Change Add	
NAME		<u> </u>				
				MODDE CO		
STREET ADDRESS						
CITY-ST-ZIP	with Above the second	at the Alline day - 12 f	6.4 CITY - S		12 O-15- 440 07/0V) Florid- Onto 5-14 (1)	
indicated of officer or d	on this arregal report or supplementa	al annual report is true and accur eiver or trustee ampowered to ex	rate and th	at my siona	I in Section 119.07(3)(i), Florida Statutes. I further certify that the informati ature shall have the same legal effect as if made under oath; that I am ar equired by Chapter 607, Florida Statutes; and that my name appears in	