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 FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS **DOCUMENT** # 1. Corporation Name P95000071540 (5) IBS INTERNATIONAL CORPORATION Principal Place of Business Mailing Address 530 EAST CENTRAL AVE., STE. 905 530 EAST CENTRAL AVE., STE. 905 ORLANDO FL 32801 ORLANDO FL 32801 3. Date Incorporated or Qualified 3a. Date of Last Report 09/13/1995 Principal Place of Business 2a. Mailing Address 4. FEI Number 21 Applied For 26 59-3335342 Not Applicable Suite, Apt. #, etc Suite, Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Ζıp Added to Fees Country Zip Country 8. This corporation has liability for intangible tax under s 199 032 Florida Statutes Yes No 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DOWNING, HAROLD L 601 SOUTH LAKE DESTINY RD. Street Address (P.O. Box Number is Not Acceptable) 82 SUITE 200 390 N. Orange Avenue 83 MAJTLAND FL 32751 Suite 800 84 City Zip Code **32801** 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 agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lambdar with, and elegations of Section 607.0505, Florida Statutes. Orlando SIGNATURE Harold L. Downing June 25, 1996 (NOTE Registered Agent's grianin inquired when relisting) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE (3/86)1.1 Title Change Addition NAME FUELLGRAF, JUERGEN 1.2 NAME STREET ADDRESS CR2E034 530 EAST CENTRAL AVE., STE. 905 1.3 STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32801 1 4 CITY - S1 - ZIP TITLE DELETE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY - \$1 - ZIP TITLE DELETE 31 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY - ST - ZIP 34 CITY-ST-ZIP TITLE DELETE 4 1 THE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST - 7IP TITLE DELETE 5.1 TiTLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY - ST - ZIP TITLE DELETE 6111116 Change Addition NAME 6.2 NAME STREET ADDRESS 63 STREET ADDRESS 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 1 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 Chapiter 617, Florida Statutes, and that my name appears in Block 12 or Block 12 if chapiter 617, Florida Statutes, and 6.4 CITY - ST - ZIP SIGNATURE: SIGNATURE AND TAPE June 8, 1996 (407) 648-8830

NG OFFICER OR DIRECTOR

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