FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

-	1996	DIVISION OF C	ORPORATIONS		
DOCUN 1. Corporation	Name	0097012 (5)			
INTERN	ational datasource, I	INC.			
Principal Place of Business		Mailing Address		E VERBINDEN IN TOLON OLIVIE MOULE BOUTH HOVEL	Villa Hiller Hilling Abrild Hillin (olte nome
727 MILWAUKEE AVENUE SUITE 2 DUNEDIN FL 34698		727 MILWAUKEE AVENUE SUITE 2 DUNEDIN FL 34698			
				3. Date Incorporated or Qualified 12/18/1995	3a. Date of Last Report
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	X Applied For
21 437 DOGWOOD COURT		T 26 PO BOX	422		Not Applicable
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	EDIN FL	City & State 28 DUNEDIN	FL	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for inta	
24 3469	8 25	29 34697-0422	30	Florida Statutes Yes	···
	9. Name and Address of Curr	ent Registered Agent	81 Name	10. Name and Address of New Reg	stered Agent
HANKINS, ROBIN D 1938 ELAINE DRIVE				ress (P.O. Box Number is Not Acceptable)	
CLEARWATER FL 34620					
ļ•			84 City		FL 85 Zip Code
or register familiar wit	to the provisions of Sections 607.05 ed agent, or both, in the State of Ficht, and accept the obligations of, Sc	orida Such change was authorized to 607.0505, Florida Statutes.	 the above-named corporation's boad by the corporation's boad Bogstered Aport signature returns 	ration submits this statement for the purpo- ard of directors. I hereby accept the appoint	se of changing its registered office then as registered agent. I am
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	D	☐ DELETE	1. 1 TIFLE		Change Addition
NAME	LAL-KISSOON, J.J.		1.2 NAME		
STREET ADDRESS 727 MILWAUKEE AVENUE S		STE 2	1 3 STREET ADDRESS		
City - St - ZiP	DUNEDIN FL 34698		1.4 CITY - ST - Z:P		Change To Addition
TITLE	D	DEFELE	2 1 TRLE		Change Addition
NAME	HANKINS, R.D.		2.2 NAME 2.3 STREET ADORESS		
STREET ADDRESS	1938 ELAINE DRIVE CLEARWATER FL 34620		2.4 CITY-S1-ZIP		
CITY-ST-ZIP TITLE	D	DELETE	3 1 TITLE	ALLER ALLER AND ADDRESS OF THE PARTY OF THE	Change Addition
NAME	EDGINGTON, W		3 2 NAME	gen group street arms of the street	and the same of th
STREET ADDRESS	2917 BELCHER ROAD		3.3 STREET ADDRESS	4 00001 75) -03/26/000103	ው በውያ ማ _{ማ ማ} በር
CITY-ST-ZIP	PALM HARBOR FL 34683		3.4 CITY - ST - ZIF	***200.00	
TITLE	D	DELETE	4. 1 THILE	ARTON COL	Change Addition
NAME	KIRCHLER, K		4.2 NAME		
STREET ADDRESS	4915 SUWANNEE AVE		4 3 STREFT ADDRESS		
C(TY - ST - ZIF	TAMPA FL 33603	[7] DELETE	4.4 CITY - ST - 7IP 5.1 TITLE		Change Addition
TITLE NAME		En precie	5.2 NAME		<u> </u>
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-S1-ZIP			5 4 CITY - ST - ZIP		
TITLE		☐ DELETE	6. 1 THILE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6 3 STREET ADORESS		

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Property Control of Cont

CR2E034 (12/95)