


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Aug 16, 1999 8:00 am
Secretary of State
08-16-1999 90007 013 ***550.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000014032
1. Corporation Name
INTERNATIONAL D & B, INC.

Principal Place of Business 321 S.E. 15TH AVENUE FORT LAUDERDALE FL 33303	Mailing Address 321 S.E. 15TH AVENUE FORT LAUDERDALE FL 33303
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21		2a. Mailing Address 26		3. Date Incorporated or Qualified 02/13/1996	
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27		4. FEI Number 65-0767705	
City & State 23		City & State 28		Applied For <input type="checkbox"/> Not Applicable	
Zip 24		Country 25		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 29		Country 30		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip 29		Country 30		8. This corporation owes the current year Intangible Personal Property. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525				10. Name and Address of New Registered Agent	
				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	
				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 title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE 0	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME WALKER, WILLIAM A		1.2 NAME	
STREET ADDRESS % 321 S.E. 15TH AVENUE		1.3 STREET ADDRESS	
CITY-ST-ZIP FORT LAUDERDALE FL 33303		1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), 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 my address.

SIGNATURE: *[Signature]* (954)
467-2000

CR2E034 (5/99)

LAW OFFICES
DAVID G. MURRAY
PROFESSIONAL ASSOCIATION
321 SOUTHEAST 15TH AVENUE
FORT LAUDERDALE, FLORIDA 33301

TELEPHONE (954) 467-2000
FACSIMILE (954) 467-2306

DAVID G. MURRAY
WALTER B. SCHNEIDER

606130-90007-13
Doc# P960000014032

MAILING ADDRESS
POST OFFICE BOX 2427
FORT LAUDERDALE, FLORIDA 33303

August 13, 1999

Division of Corporations
Annual Reports Filing
Post Office Box 1500
Tallahassee, Florida 32302-1500

RE: INTERNATIONAL D & B, INC.
Filing of 1999 Annual Report

Dear Sir/Madam:

Enclosed please find the 1999 Annual Report for INTERNATIONAL D & B, INC.
together a check in the amount of \$550.00 representing the filing fee.

If you should have any questions regarding the enclosed, please do not hesitate to
contact myself or my legal assistant, Rose Tarasuk.

Very truly yours,


DAVID G. MURRAY

DGM/rt
Enclosures

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