

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 11 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P96000017849 (6)

1. Corporation Name

INTERNATIONAL ADULT GIFT SHOPPES, INC.



Principal Place of Business

Mailing Address

4408 N ORANGE PLACE
ORLANDO FL 32804

4408 N ORANGE PLACE
ORLANDO FL 32804

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/27/1996

4. FEI Number

APPLIED FOR 650643676

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

~~BRISTOW, JOHN
330 N BROADWAY AVENUE
ORLANDO FL 32803~~

10. Name and Address of New Registered Agent

81 Name

Paul Novak

82 Street Address (P.O. Box Number is Not Acceptable)

5415 Lake Howell Rd. Ste # 278

84 City

Winter Park

FL

85 Zip Code

32792

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

Paul Novak 5-1-98

12. OFFICERS AND DIRECTORS

TITLE PSD
NAME NOVAK, ARLETTE M
STREET ADDRESS 4408 N ORANGE PLACE
CITY-ST-ZIP LAKE WORTH FL 32804-1903

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

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☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE PSD
12 NAME Paul Novak
13 STREET ADDRESS 5415 Lake Howell Rd Ste # 278
14 CITY-ST-ZIP Winter Park, FL 32792

☐ Change ☒ Addition

21 TITLE
22 NAME
23 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

31 TITLE
32 NAME
33 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

41 TITLE
4.2 NAME
43 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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 an address

CR2E034 (10/97)