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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000019050 (9)

INTEGRATED SYSTEMS GROUP, INC.

## FILED Apr 21 1997 8:00am Secretary of State

Principal Pla 3891 NW 4 S MIAMI FL 331		Mailing Address 3691 NW 4 STREET MIAMI FL 331 26-5621						
					3. Date incorporated or Qua	lified 3a, D	ate of Last R	eport
2. Principal	Place of Business	2a. Mailing Address		<del> </del>	4. FEI Number			plied For
21 389	I NW 4 ST	26 3891	NW 4	57.	65-064 78	36		ot Applicable
Suite, Apl 22 M/	t #, etc ANI CL	Suite, Apt. #, etc	NW 4		5. Certificate of Status Desire	ed 🔲		Additional equired
City & Str	126 USA	Cily & State	·		Election Campaign Finance     Trust Fund Contribution	oing 🗆		May Be to Fees
7 <sub>(p)</sub>	Country 25	Zip 3 31 20	, Coun	USA	This corporation has liabil     Florida Statutes		***************************************	
	9. Name and Address of Co				10. Name and Address of N	ew Registered	Agent	
	eman, Jose		1	Name S4	NE			
	91 NW 4 STREET		ļ.		ress (P.O. Box Number is Not Ac	ceptable)		<del></del>
MV	AMI FL 33126		ļ.	вз				
				B4 City			<b>85</b> Zip	Code
			İ			FL	.   `	
eigle ne i	It to the provisions of Sections 607 registered agent, or both, in the t am familiar with and occept the o		o, i londa otato	ico.	4	16th. 11	-	
SIGNATURE		red agent and life if soptcable	~	Agent signature requi		OFFICERS AND	DIDECTO	DO 161 42
SIGNATURE  12.	OFFICERS	red agent and life if applicable S AND DIFFECTORS  DELEY	13.		red when reinstating) ADDITIONS/CHANGES TO	OFFICERS AN	D DIRECTOR	RS IN 12
12.	PSTD ALEMAN, JOSE	S AND DIRECTORS	13.	.E		OFFICERS ANI		
<b>12.</b>	PSTD ALEMAN, JOSE 3891 NW 4 STREET	S AND DIRECTORS	13. E 1.1 TITL 1.2 NAM	.E		OFFICERS ANI		
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1. I do 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 an officer or director of the corporation or the receiver of trusteg empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607, or on an anachment with a suddress.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/97 305-532-09/5
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