FILE NOW: FILING FEE AFTER MAY 1ST IS \$50.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED

Apr 30 1998 8:00am

Secretary of State

DOCUMENT # P9600036060 (7)

INTERNATIONAL RESOURCE MARKETING, INC.

Principal Place of Business Mailing Address					
SUITE B		5050 NINTH ST. NORTH SUITE B			
NAPLES FL 33940		NAPLES FL 33940		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				04/25/1996	
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 Suite des	4 610	Suite, Apt. #, etc.		65-0695108	Not Applicable
Suite, Apt. #, etc.		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	θ	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25	29	30	Personal Property Tax due June 30.	Yes XNo
	9. Name and Address of Cur	rent Registered Agent	81 Name	10. Name and Address of New Register	ed Agent
	NSLEY, KAREY C		81 Name		į
5117 CASTELLO DR			82 Street	Address (P.O. Box Number is Not Acceptable)	
	E. 1		83		
NA	PLES FL 34103				
<u> </u>			84 City	F	85 Zip Code
11. Pursuant	to the provisions of Sections 607.0	0502 and 607.1508, Florida Statute	s, the above-named	corporation submits this statement for the purpos	e of changing its registered
office or r	registered agent, or both, in the St. Im familiar with, and accept the ob-	ate of Florida, Such change was a ligations of, Section 607,0505, Flo	uthorized by the corp orida Statutes	poration's board of directors. I hereby accept the	appointment as registered
SIGNATURE	The state of the s	ngiamino oi, cootoir por roodo, i ro	Tion Officeros.		
SIGNATURE	Signature, typed or printed name of registered		Registered Agent signature	required when reinstating) DAT	E
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D CASY	☐ DELETE	1.1 TIYLE		Change Addition
NAME	WALKER, GARY	TE D	1.2 NAME		
STREET ADDRESS	505 0 Ninth St. North, S Naples Fl 33940	olt. D	1.3 STREET ADDRESS		,
CITY-ST-ZIP	MAPLES PL 33940	DELETE	1,4 CITY-ST-ZIP		Change Addition
NAME			2.2 NAME		Change Channel
STREET ADDRESS			2.3 STREET ADDRESS		}
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3 2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY+ST-ZIP			3.4. CITY - ST - ZIP		. <u> </u>
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		D britte	4.4 CITY - ST - ZIP		
TITLE	10	DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		Į
CITY-ST-ZIP		DELETE	5.4 CITY - ST - ZIP		Change
TITLE		☐ DELETE	6.1 T TL€		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

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 supplimental 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 of trusted 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 of an an attachment with an address.