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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000036575 (4)

May 12 1998 8:00am Secretary of State

FILED

INT	rernational watch	& CLOCK REPA	AIRS,	INC	c.
Principal Place of Business Mailing Address					
1	• • • • • • • • • • • • • • • • • • • •				
	W. Glades Road	same			
Boca	Raton, FL 33434			,	DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
6 Branco		1 2			04/24/96
· ·	Place of Business	2a. Mailing Address			4. FEI Number Applied For
Suite, Apt	# air	Suite, Apt. #, etc.			65-0689767 Not Applicate
22		27			5. Certificate of Status Desiréd \$8.75 Additional Fee Required
City & Sta	nte	City & State	•		6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution
Zip 24	Country	Zip	Cour	ntry	8. This corporation owes or has paid the current year Intangible
24	25 Server and Address of Correct	29	30		Personal Property Tax due June 30. Yes No
	9. Name and Address of Current	negistered Agent		81 Nam	10. Name and Address of New Registered Agent
	ALL, CHARLES P.			110	
	L PALM TOWERS III			82 Stree	eet Address (P.O. Box Number is Not Acceptable)
	S. DIXIE HIGHWAY	, SUITE 5AB	ł	83	the state of the s
BOCA	RATON, FL 33432				
			[84 City	y FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statul	es, the ab	ove-name	ned corporation submits this statement for the purpose of changing its registered
office or a	registered agent, or both, in the State o	f Florida Such change was a	authorized	by the co	corporation's board of directors. I hereby accept the appointment as registered
SIGNATURE	and accopy the congar	10 15 CI, CCCION CO1.0000, 1 K	Ji ida Otato	nes.	
SIGNATURE .	Signature typed or printed name of registered agent	and title it applicable (NOT	E Registered	Agent signatu	ative required when reinstating) DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P/V/T/S	☐ DELETE	1.1 7(1)	LE	☐ Change ☐ Addition
NAME	GEDDES, ROY F.	2012	1.2 NA	ΝE	
STREET ADORESS	8221 W. GLADES			EET ADDRESS	SS
CITY-ST-ZIP TITLE	BOCA RATON, FL	33434		Y-ST-ZIP	
		L. OELEIE	2 1 T≀TL		☐ Change ☐ Addition
NAME STATES ADDRESS			2.2 NAN	-	
STREET ADDRESS CITY-ST-ZIP				EET ADDRESS	SS
TITLE		☐ DELETE	3.1 TITL	Y·ST·ZIP	☐ Change ☐ Addition
NAME		22 20000	3.2 NAM		
STREET ADDRESS				eet address	ss
CITY - ST - ZIP			. I	Y - ST - ZIP	~]
TITLE		☐ DELETE	4.1 T(TL)		☐ Change ☐ Addition
NAME			4. 2 NAI	νE	
STREET ADDRESS			4.3 STR	EET ADDRESS	ss
CITY-ST-ZIP			44 CITY	- ST - ZIP	
TITLE		☐ DELETE	5 1 TITLE	E	☐ Change ☐ Addition
NAME			5.2 NAM	E	\tu_{\tu}_{\tu}_{\tu}
STREET ADDRESS			5.3 STRE	ET ADDRESS	ss ~ \land
CITY-ST-ZIP			5.4 CITY		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			62 NAM		800002522648
STREET ADDRESS				ET ADDRESS	
CITY-ST-ZIP			64 CITY	-ST-ZIP	***150.00

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 it enamped, or on an attachment with an address

CIONATURE.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4.29.98

Ouytime Phone #

72E034 (10/97