## 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

	JMENT # P960 IOW SERVICES, INC.	000496	44 (3)						
Principal Place of Business Mailing Address					<del></del>		# <b>48</b> 111 <b>3181</b>	MAINE BATA D	1011 0101 1001
801 NW 30TH STREET 801 NW 30TH STREE WILTON MANORS FL 33311 WILTON MANORS FL						DO NOT WRITE IN THIS SPACE			
						<ol> <li>Date Incorporated or Qualified 06/10/1996</li> </ol>			
2. Principal Place of Business 2e. Mailing Address						4. FEI Number		T 14	Applied For
21		26	├ <del>─</del> ─¬			65-0678262			ot Applicable
Suite, Ap	ot. #, etc		Suite, Apt. #, etc.			5. Certificate of Status Desired	SR 75 Additional		
28			3. State			Election Campaign Financing     Trust Fund Contribution			
Zip 24	Country 25	Zip 29	29 30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
	9. Name and Address of Co	urrent Registered A	gent	B1	Mama	10. Name and Address of New Reg	pistered A	gent	
LEONARD, C. GLENN					1 Name				
4875 N FEDERAL HIGHWAY 10TH FLOOR FORT LAUDERDALE FL 33308				82	82 Street Address (P.O. Box Number is Not Acceptable)				
				83	3				<del> </del>
	OIN ENDERHANDE I C 00000					.,	,	,	
				84	City		FL	<b>85</b> Zip	Code
11. Pursuar office of agent. I	nt to the provisions of Sections 607 or registered agent, or both, in the I am familiar with, and accept the o	7.0502 and 607.1508 State of Florida Sucl obligations of, Soctic	, Florida Statutes, the change was author in 607.0505, Florida	ne abov prized by Statute	e-named co the corpora s.	rporation submits this statement for the pi ation's board of directors. I hereby accep		changing intment a	its registered s registered
SIGNATURE			de chore 5	latoro d 4	al sings as see	ured when reinstating)	DATE		
Signature, typed or pointed name of registered agent and liftle if applicable (NOTE Registred  12. OFFICERS AND DIRECTORS  13					ni signative req	ADDITIONS/CHANGES TO OFFIC		DIRECTO	RS IN 12
TITLE	D DELETE			1.1 TITLE				Change	Addition
NAME	WINSLOW, ELIZABETH A		ł	1.2 NAME	]				
STREET ADDRESS	STREET ADDRESS 801 NW 30TH STREET			1.3 STREET ADDRESS					
CITY-ST-ZIP				1.4 CITY-ST-ZIP				<del></del>	
TITLE				2.1 TITLE	{		i	Change	Addition
NAME				2.2 NAME	<b></b>				
STREET ADORESS	s			2.3 STREET					
CITY-ST-ZIP TITLE				2. 4 CITY-: 3.1 TITLE	51 - ZIP		Γ	Change	Addition
NAME			_	32 NAME				0.00.00	- Addition
STREET ADDRESS	s			33 STREET	ADDRESS				
CITY-ST-ZIP	-			3.4. CITY-					
TITLE			-	4.1 TITLE				Change	Addition
NAME	1			4. 2 NAME					

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 eath, 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.

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

63 STREET ADDRESS

5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

**SIGNATURE:** 

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-2IP

NUME

DELETE

DELETE

(954) 561-9237

**FILED** 

May 01 1998 8:00am

Secretary of State

Addition

Addition

Change