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

FILED May 08 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 P96000059845 (3) DOCUMENT # I.D.S. REALTY, INC. Principal Place of Business Mailing Address 8440 STATE ROAD 84 8440 STATE ROAD RA DAVIE FL 33324 DAVIE FL-33324 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 07/17/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 10097 CLEARY BLVO. 65-0684152 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired SUITE 357 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be FT. AU DERDALE 28 Trust Fund Contribution Added to Fees 23 Zip Country Country This corporation owes or has paid the current year Intangible FL BROWARD □ No Personal Property Tax due June 30. 24 25 29 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent FILINGS, INC. Name 3732 N.W. 16TH STREET Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33311-4132 83 City Zip Code 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. ENOUNCECETS. Signature, typed or printed same of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Addition Change TITLE 1.1 TITLE STRAULEA, ION NAME 1.2 NAME 6 W 106 TERRACE 8440 STATE ROAD 84 1431 STREET ADDRESS 1.3 STREET ADDRESS **DAVIE FL 33324** DAULE 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE NAME 2.2 NAME STREET ADORESS 2.3 STREET ADDRESS 2. 4 CITY - ST - ZIP DELETE Addition 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - 7IP 3.4. CITY-ST-7/P DELETE TITLE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME **5.3 STREET ADDRESS** STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST-ZIP TITLE DELETE 6.1 TITLE Addition

14. Thereby 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.

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6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS CITY-ST-ZIP

4/24/98

954/424-0480