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May 07 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000074619 (3)

1. Corporation Name

THE INFORMATION EXCHANGE SERVICE, INC.

Principal Place of Business

C/O US SMALL BUSINESS SERVICE  
P.O. BOX 3347  
HOLIDAY FL 34680

Mailing Address

C/O US SMALL BUSINESS SERVICE  
P.O. BOX 3347  
HOLIDAY FL 34680-0347



2. Principal Place of Business

21 5506 Bluejay Ln.  
Suite Apt. #, etc.

22

City & State

23 Tampa FL

Zip

24 33625

Country

25 Hillsborough

2a. Mailing Address

26 P.O. Box 270936  
Suite Apt. #, etc.

27

City & State

28 Tampa FL

Zip

29 33688-0936

Country

30 Hillsborough

9. Name and Address of Current Registered Agent

JANEZIC, JOSEPH A  
1004 US HIGHWAY 19  
SUITE 202  
HOLIDAY FL 34681

3. Date Incorporated or Qualified  
09/05/1986

3a. Date of Last Report

4. FEI Number  
59-3401316

Applied For  
Not Applicable

5. Certificate of Status Desired

8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

10. Name and Address of New Registered Agent

81 Name C. Randall Baumgartner

82 Street Address (P.O. Box Number is Not Acceptable)

83 5506 Bluejay Ln.

84

City Tampa

FL

85 Zip Code  
33625

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 amenable with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE C. Randall Baumgartner

C. Randall Baumgartner

April 29, 1997

(NOTE: Registered Agent signature required when installing)

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP

TITLE NAME STREET ADDRESS CITY - ST - ZIP

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TITLE NAME STREET ADDRESS CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE NAME STREET ADDRESS CITY - ST - ZIP

1.2 NAME STREET ADDRESS CITY - ST - ZIP

1.3 STREET ADDRESS CITY - ST - ZIP

1.4 CITY - ST - ZIP

2.1 TITLE NAME STREET ADDRESS CITY - ST - ZIP

2.2 NAME STREET ADDRESS CITY - ST - ZIP

2.3 STREET ADDRESS CITY - ST - ZIP

2.4 CITY - ST - ZIP

3.1 TITLE NAME STREET ADDRESS CITY - ST - ZIP

3.2 NAME STREET ADDRESS CITY - ST - ZIP

3.3 STREET ADDRESS CITY - ST - ZIP

3.4 CITY - ST - ZIP

4.1 TITLE NAME STREET ADDRESS CITY - ST - ZIP

4.2 NAME STREET ADDRESS CITY - ST - ZIP

4.3 STREET ADDRESS CITY - ST - ZIP

4.4 CITY - ST - ZIP

5.1 TITLE NAME STREET ADDRESS CITY - ST - ZIP

5.2 NAME STREET ADDRESS CITY - ST - ZIP

5.3 STREET ADDRESS CITY - ST - ZIP

5.4 CITY - ST - ZIP

6.1 TITLE NAME STREET ADDRESS CITY - ST - ZIP

6.2 NAME STREET ADDRESS CITY - ST - ZIP

6.3 STREET ADDRESS CITY - ST - ZIP

6.4 CITY - ST - ZIP

P  
C. Randall Baumgartner  
5506 Bluejay Ln.  
Tampa, FL 33625

S  
Betty Ann Baumgartner  
5506 Bluejay Ln.  
Tampa, FL 33625

CS  
5/7/97

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\*\*\*173.75

14. 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 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.

SIGNATURE: C. Randall Baumgartner C. Randall Baumgartner 4/24/97 813-264-4844

CR2E034 (9/96)