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

PROFIT CORPORATION **ANNUAL REPORT**

1998



Secretary of State DIVISION OF CORPORATIONS

P96000076237 (2) DOCUMENT #

INTERSTATE TRAFFIC SYSTEMS, INC.

FILED Apr 09 1998 8:00am Secretary of State



Principal Place of Business		Mailing Address	Malling Address			
2650 N.W. 52ND COURT CHIEFLIND FL 32626		2850 N.W. 52ND CO CHIEFLND FL 32626	2650 N.W. 52ND COURT CHIEFE NO. 51, 32626			
CHIEFUND IL SESSO		OTHER END TE DEDEC	OFFICE LIND I'L GEGEO			DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						09/12/1996
9 Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number Applied For
	ace or business	—	Hi i			59-3399395 Not Applicable
21		26 Cuito Apt # oto	Suite, Apt. #, etc.			\$8.75 Additional
Suite, Apt. #, etc.		<u> </u>	Suite, Api. #, etc.			5. Certificate of Status Desired Fee Required
City & State	<u> </u>	City & State				Election Campaign Financing \$5.00 May Be
23		28	¬ '			Trust Fund Contribution Added to Fees
Zip			rip Country			8. This corporation owes or has paid the current year Intensible
24	25	29	30	•		Personal Property Tax due June 30. Yes No
27	9. Name and Address of Curr		1901			10. Name and Address of New Registered Agent
LIA				81	Name	the state of the s
HAMMOND, DIANA M 2850 NW 52ND COURT						
			82 Street Ad		Street	eet Address (P.O. Box Number is Not Acceptable)
CH	EFLND FL 32626		}	83		
			Į			
				84	City	y Fi 85 Zip Code
44 Purguant i	a the provisions of Sections 607 D	502 and 607 1508 Florida S	talutes the al	V) VA	-namer	
office or re	egistered agent, or both, in the Sta	te of Florida. Such change	was authorized	d by	the co	ned corporation submits this statement for the purpose of changing its registered corporation's board of directors. I hereby accept the appointment as registered
agent. I a	m familiar with, and accept the obl	igations of, Section 607.050	5, Florida Stati	ules	,	
SIGNATURE	Signature, typind or printed name of registered i	nound and liter of productable	(N/)TF: Bagistered	(Amer	nt signatu	nature roquired when reinstating) DATE
12.		ND DIRECTORS	13.		in digitation	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PTD	☐ DELETE		îi F		☐ Change ☐ Addition
NAME	HAMMOND, DIANA M	_	1.2 NA			
	2650 NW 52ND COURT				ADDRESS	ron
STREET ADDRESS	CHIEFLIND FL					
CITY - ST - ZIP	VP	DELETE	1.4 CF		r-ZIP	Change Addition
TITLE	**					. Ununga Caraca
NAME	HAMMOND, WILLIAM T JR.		2.2 NA			
STREET ADDRESS	2650 NW 52ND COURT		2.3 \$1	REET	ADDRESS	ESS .
CITY-ST-ZIP	CHIEFLND FL		2. 4 C		T-ZIP	
TITLE	SD	☐ DELETE	3.1 TIT	TLE		Change Addition
NAME	HAMMOND, JANET A		3.2 NA	ME		
STREET ADDRESS	2650 NW 52ND COURT		3.3 ST	REET	address	ESS
CITY - ST - ZIP	CHIEFLND FL		3.4. CI	ITY-S	T-ZIP	
TITLE		DELETE	4.1 TO	TLE		☐ Change ☐ Addition
NAME			4.2 N	AME		
STREET ADDRESS			4.3 ST	REET	ADDRESS	ess
CITY-ST-ZIP			4.4 CF	TY-\$1	T-ZIP	
TITLE		☐ DELETE				Change Addition
NAME			5.2 N	ME		
STREET ADDRESS			5 3 SI	REET.	ADDRESS	ess
CITY-ST-ZIP			5.4 Cf			
TITLE		DELETE			,	Change Addition
MAME		Jeen Steen	6.2 NJ			
'' ''					ADDRESS	rce
STREET ADDRESS						100
CITY-ST-ZIP		, , , , , , , , , , , , , , , , ,	6.4 CI	17 - S	I - 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 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

4-10-98