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

PROFIT CORPORATION ANNUAL REPORT

1**9**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P96000090221 (8)

SGS AT IBIS, INC.

Principal Place of Business	Mailing Address
1800 CORPORATE BLVD #300 BOCA RATON FL 33431	1800 CORPORATE BLVD #300 BOCA RATON FL 33431

FILED Apr 28 1998 8:00am Secretary of State



1 Till to part lac	o or business	mailing radiced			
	ATE BLVD #300	1800 CORPORATE BLVD	#300		
BOCA RATON	FL 33431	BOCA RATON FL 33431		DO NOT WRITE IN THI	C CDACE
					3 SPACE
				3. Date Incorporated or Qualified	
				11/04/1996	
2. Principal P	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0704242	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.				\$8.75 Additional	
22		27		5. Certificate of Status Desired	Fee Required
City & State	3	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the o	
24	25	29	30	Personal Property Tax due June 30.	Yes No
241	9. Name and Address of Curre		1301	10. Name and Address of New Registere	
		Trogration Macin	81 Name	IV. HERIO ENO MACIOSO OI HOW Itograte(o	o Agont
	ep pe l, joel p		Traine		
222	LAKEVIEW AVENUE		82 Street Ad	idress (P.O. Box Number is Not Acceptable)	
SUI	TE 260				
W. I	PALM BEACH FL 33401		83		
			44 0		
			84 City	F	85 Zip Code
44 Pursuant I	to the provisions of Sections 607 BE	02 and 607 1509 Florida Statut	on the chara paradica	orporation submits this statement for the purpose	
office or re	egistered agent, or both, in the State	e of Florida. Such change was a	es, the above-hamed co authorized by the corpor	ration's board of directors. I hereby accept the ap	ppointment as registered
agent. i a	m fa miliar with, and accept the oblig	ations of, Section 607,0505, Flo	orida Statutes.		
SIGNATURE					
	Signature, typed or printed name of registered ag	ent and little if applicable. (NOT	E: Registered Agent signature rec	quired when reinsteting) DATE	
12.	OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	DP	☐ DELE te	1.1 TITLE		Change Addition
NAME	SIEGEL, NED L		1.2 NAME		
STREET ADDRESS	1800 CORPORATE BLVD., N.	W STF 300	1.3 STREET ADDRESS		
	BOCA RATON FL 33431	, 012 000	1.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE	DVS	☐ DEL e te	2.1 TITLE		Change Addition
					Custings Caracteria
NAME	GRUNDT, BRUCE S		2.2 NAME		
STREET ADDRESS	1800 CORPORATE BLVD NW	/, STE 300	2.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33431		2. 4 CITY - ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS	•		3.3 STREET ADDRESS		
CITY-ST-ZIP		T Neight	3.4. CITY-ST-ZIP		Change Addition
TITLE		[_] DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE	· · · · · · · · · · · · · · · · · · ·	DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
' I					
STREET ADDRESS			5.3 STREET ADDRESS		Ï
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6 2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
i					
CITY-ST-ZIP		24 41 9	6.4 CITY - ST - ZIP	in Section 110 07(2Vi) Florida Statutos I further	

receive 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 acceiver 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 an appear an address.

SIGNATURE: