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

P97000005719 (4)

DOCUMENT #

FILED Jun 02 1998 8:00am Secretary of State

ISO IN	TERNATIONAL, INC.				
Principal Plac	ee of Business	Mailing Address			66181 61781 10984 11018 (811 198)
#9 FORT ROYAL ISLE #9 FORT ROYAL ISLE					
FORT LAUDERDALE FL 33308 FORT LAUDERDALE FL 333			308		
			•	DO NOT WRITE IN TH	IIS SPACE
ŧ				3. Date Incorporated or Qualified	
				01/21/1997	
2. Principal f	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 26			65-0/209/2	Not Applicable	
Suite, Apt. #, etc.			Certificate of Status Desired	\$8.75 Additional	
27					Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23	Country	28 Zip	Country	Trust Fund Contribution	Added to Fees
Zip	<u>├</u> ─┐	P - □	-	This corporation owes or has paid the Personal Property Tax due June 30.	Current year Intangible
24	25 9. Name and Address of Curre		30	10. Name and Address of New Register	
AL	MERILAWYER CHARTERED		81 Name/		
	3 ALMERIA AVENUE		/ /smi	FICAN CORPURATION	5 (Whomeros Dec
	DRAL GABLES FL 33134		82 Street Add	ress (P.O. Box Number is Not Acceptable)	'
"	THAL GADLES FL 33134		83	ONE 23 SY	
)					
ļ			84 City	/ company of the E	85 Zip Code
11 Purcuant	to the requisions of Soctions 607.05	02 and 607 1508. Florida Statutas	the above named corr		
office or	registered agent, or both, in the Sylle	of Florida Such change was ac	thorized by the corporal	poration submits this statement for the purposition's board of directors. I hereby accept the	appointment as registered
	am familianimite and accept the Tyblic	jations of Becton 607.0505, Hor	ida Statutes		
SIGNATURE	Stofature typest confining in the dang sheet au	alle	Registered Agent signature requi	red when reinstating) DAT	
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PSTD	DELETE	1.1 1111.6		Change Addition
NAME	JOINER, CONSUELO		1.2 NAME		[.
STREET ADDRESS	#9 FORT ROYAL ISLE		1.3 STREET ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE FL 3330	08	1.4 CITY - ST - ZIP		
TITLE		DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	\		2.2 NAME		
STREET ADDRESS	1		23 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY - 51 - ZIP		
TITLE		DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		į
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
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		☐ DFLETE	5.1 TITLE		Change Addition
NAME	!		5.2 NAME		J(61
STREET ADDRESS	}		5.3 STREET ADDRESS		*/2
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE	period pe	Change Addition
NAME			62 NAME	9000025474	F25
STREET ADDRESS			6.3 STREET ADDRESS	-06 <u>/04</u> /9801033	U19 (
CITY - ST - ZIP			6.4 CITY - ST - ZIP	***300.00	

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 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 other attachment with an address.