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

PROFIT CORPORATION ANNUAL REPORT

1998

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FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000022196 (4) DOCUMENT #
1. Corporation Name

Principal Place of Business Mailing Address 1300 CORAL WAY 1300 CORAL WAY SUITE 300 SUITE 300 MIAMI FL 33145 MIAMI FL 33145

**FILED** Apr 01 1998 8:00am Secretary of State

INTERNATIONAL LIGHTING SYSTEMS, INC. DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/05/1997 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Interprible 24 Yes 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name PINO. WILLIAM E 1300 CORAL WAY Street Address (P.O. Box Number is Not Acceptable) **SUITE 300** 83 **MIAMI FL 33145** 84 City 85 Zip Code 11. Pursuant to the provisions of Soctions 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. **SIGNATURE** Signature, typed or printed name of registered eyent and trie if applicable (NOTE Registered Agent signature required when reinstating) CR2E034 (10/97 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition 1.1 TITLE TITLE PELLEGRINO, FABRICE 1.2 NAME NAME 1164 DALE ST STREET ADDRESS 1.3 STREET ADDRESS LAVAL CANADA CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition DS 2.1 TITLE TITLE PINO. WILLIAM E NAME 2.2 NAME STREET ADDRESS 102 N PROSPECT DR 2.3 STREET ADDRESS **CORAL GABLES FL 33133** CITY-ST-ZIP 2. 4 CITY - ST-ZIP Addition DELETE Change 3.1 TITLE TITLE 3.2 NAME NAME STREET ADDRESS **33 STREET ADDRESS** CITY-ST-ZIP 34. CITY-ST-ZIP DELETE Change Addition 41 TITLE TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE ☐ Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP

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 at 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 processor or useful empowered to execute his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or an attachment within address

SIGNATURE: