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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

SIGNATURE:

P97000026306

FILED May 27 1998 8:00am Secretary of State

| INTERI | NATIONAL SERVICES | AND EQUIPME | NT C | OR | PORATI | on | | | | |
|---|--|--|---------------------------|---------------------------------------|--|---|------------------------|----------------------|--------------------------|--|
| Principal Place of Businoss Mailing Address | | | | | | | | | | |
| 1455 N. TREASURE DRIVE SAME APT. #2R NORTH BAY VILLAGE, FL 33141 | | | | | | DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified | | | | |
| | | | | | | MARCH_24, 1997 | | | | |
| Principal Place of Business 2a. Malling Address | | | | | | 4. FEI Number | | | Applied For | |
| 21 SAME AS ABOVE 26 SAME AS A Suite, Apt. #, etc. Suite, Apt. #, etc. | | | | Ξ_ | | 65-0741757 | - | 607 | Not Applicable | |
| 22 27 | | | | | | 5. Certificate of Status Desired | | * | 5 Additional Required | |
| City & State City & State | | | | | | 6. Election Campaign Financing | · | | 00 May Be | |
| 28 | | | | | | Trust Fund Contribution | | | led to Fees | |
| Zip | | | | itry | | 8. This corporation owes or has p | aid the cur | rent year | r Intangible | |
| 24 | 25 | 29 | 30 | | | Personal Property Tax due June | | Yes | No No | |
| | 9. Name and Address of Current | Registered Agent | | | | 10. Name and Address of New Ro | gistered | lgent | | |
| BRAYAN F. PERALTA | | | | | 81 Name | | | | | |
| | | | | 82 | Street Address (P.O. Box Number is Not Acceptable) | | | | | |
| 911 FONTAINEBLEAU BLVD. #110 | | | | 83 | | | · | | | |
| MI, FL 33172 | | | | | | | | | | |
| ▼ | | | [1 | 94 | City | , | FL | 85 Z | Zip Code | |
| office or i agent. I a SIGNATURE | to the provisions of Sections 607.0502 registered agent, or both, in the State of am familiar with, and accept the oblight signature type or printed race of registered agent. | Florida Such change was a ons of Section 607.0505, Flor and blood application (NOI | authorized orida Statu | by iles | the corporatio | n's board of directors. I hereby acce | ot the appo | ointment | ās registered | |
| 12. | DELETE | | | | ··· | ADDITIONS/CHANGES TO OFFI | | DIRECT Change | | |
| NAME | BRAYAN F. PERALTA | | | 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS | | | | C Chang | Jo La Addition | |
| STREET ADDRESS | | | | | | | | | | |
| CITY-ST-ZIP | 9/11 FONTAINEBLEAU BLVD. #110 | | | | - ZIP | | | | | |
| TIFLE | MIAMIT FL 331/2 DELETE 21 | | | | | | -, | Chang | ge 🔲 Addition | |
| NAME | VICE PRESIDENT | | | AE. | | | | | | |
| STREET ADDRESS | FELIPE HIDALGO | | | EET / | ADDRESS | | | | | |
| CITY-ST-ZIP | 1455 N TREASURE DRIVE #2R | | | Y- S | 1 - 21P | | | | | |
| TITLE | NORTH BAY VILLAGE, FL POLITIES SECRETARY/TREASURER | | | .F | | , | | ☐ Chang | ge 🔲 Addition | |
| NAME | ERIC A. VALDEZ | | | AE. | | | | | | |
| STREET ADDRESS | 11147 N. KENDALL DR. #D103 | | | | ADDR I SS | | | | | |
| CITY-ST-ZIP TITLE | 144 147 Dr. 00176 | | | | I - ZIP | | | Chang | ne 🔲 Addition | |
| NAME | | La Ottele | 4 1 TITU 4 2 NAI | | | | | אוופווע ייייו | to The Windings | |
| STREET ADDRESS | | | • | | ADDRESS | | | | | |
| CHTY-ST-ZIP | | | 4.4 CITY | | | | | • | | |
| TITLE | | □ DELETE | 5 1 HJL | _ | | | , | ☐ Chang | ge 🔲 Addition | |
| NAME | | | 5 2 NAN | AF. | | 5000025: -05/ <u>2</u> 8/98010 | 396 | 65 | | |
| STREE1 ADDRESS | ss | | | 5.3 STREE1 ADDRESS | | -05/28/9801 | J270 | 126 | → | |
| C(TY-ST-Z)P | | | 5.4 CIT | r-\$1 | - ZIP | ***150.00 | | | Δ | |
| TITLE | | ☐ DELETE | 61 TITE | | | | | L Chang | je Addition | |
| NAME | | | 62 NAV | | | | | | · Lan ' | |
| STREET ADDRESS | | | | | ADDRESS | | | | '\V <i>\</i> _ | |
| CITY-ST-ZIP | pertify that the information supplied with | this fling goes not qualify to | 64 City | noti | on otated in C | ection 119 07/9V/\(i\) Florida Statutos I | further oc | rtify that | the formation | |
| indicated officer or Block 12 | on this annual report or supplemental director of the corporation or the receiver or Block 13 if changed, or on an altast | armual report is true and accer or trustee empowered to empower with an address. | urate and execute th | tha is re | I my signature oport as requir | shall have the same legal effect as i ed by Chapter 607, Florida Statutes. | made und and that m | ier oath; y name | that I am an appears in | |