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

FILED Jul 07 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1**9**98 DIVISION OF CORPORATIONS DOCUMENT # P97000029426 (8) **IVKA INC** Principal Place of Business Mailing Address 676 W PROSPEÇT ROAD 676 W PROSPECT ROAD FT LAUDERDALE FL 33309 FT LAUDERDALE FL 33309 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/01/1997 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 650753694 21 26 Not Applicable Suite, Apt. #, etc Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 **\$5.00** May Be City & State City & State 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year intengible Yes 24 Personal Property Tax due June 30. ∄ No. 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent PENN, JOY 81 Name 676 W PROSPECT ROAD Street Address (P.O. Box Number is Not Acceptable) 82 FT LAUDERDALE FL 33309 83 В4 City Zip Code 85 11. Pursuant to the provisions of Sections 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 region red agree and tip it a (NOTE: Registered Agent signature required when reinstation) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. Addition Change TITLE 1.1 TITLE NAME 1.2 NAME STREET ADDRESS 1.3 STREET ADDRESS 14 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change ■ Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY - ST - ZIP DELETE Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4 3 STREET ADDRESS 4.4 CiTY-ST-ZIP CITY-ST-7(P DELETE 5.1 TITLE Addition TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP Change DELETE Addition 6.1 TITLE TITLE 600002583826

6.2 NAME

14. I hereby certify that the information supplied with this filling 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 this receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

6.3 STREET ADDRESS

Block 12 or Block 13 if changed, or on an attachment with an address

NAME

STREET ADDRESS

4/27/98

***150.00

-07/03/38--01010--022

(954) 766-2660

Richard Tichy