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FILED

May 22 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P97000031864

1. Corporation Name

I. P. S. ENTERPRISES CORP.

Principal Place of Business

Mailing Address

8532 NW 66 ST  
MIAMI FL 33166

8532 NW 66 ST  
MIAMI FL 33166

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

4-8-97

4. FEI Number

65-0704508

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 8532 NW 66 ST

Suite, Apt. #, etc.

2a. Mailing Address

26 8532 NW 66 ST

Suite, Apt. #, etc.

City & State

23 MIAMI FL 33166

Zip

Country

24 33166

25 DOME

City & State

28 MIAMI FL 33166

Zip

Country

29 33166

30 DOME

9. Name and Address of Current Registered Agent

JUIS R. MATHANER  
8532 NW 66 ST  
MIAMI FL 33166

10. Name and Address of New Registered Agent

81 Name JUIS R. MATHANER  
82 Street Address (P.O. Box Number is Not Acceptable)  
8532 NW 66 ST  
83  
84 City MIAMI FL  
85 Zip Code 33166

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

JUIS R. MATHANER

(NOTE: Registered Agent Signature required when reappointing)

4-18-98

DATE

12. OFFICERS AND DIRECTORS

TITLE DPT  
NAME JUIS R. MATHANER  
STREET ADDRESS 8532 NW 66 ST  
CITY-STATE-ZIP MIAMI FL 33166

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE JOSE G. GUANISMA  
12 NAME 8532 NW 66 ST  
13 STREET ADDRESS MIAMI FL 33166  
14 CITY-STATE-ZIP

21 TITLE JOSE G. GUANISMA JR  
22 NAME 8532 NW 66 ST  
23 STREET ADDRESS MIAMI FL 33166  
24 CITY-STATE-ZIP

31 TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY-STATE-ZIP

41 TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY-STATE-ZIP

51 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY-STATE-ZIP

61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY-STATE-ZIP

14. I hereby 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 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 on an attachment with an address.

CR2E034 (10/97)