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Jun 04 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 # P97000034685

1. Corporation Name

INTERNATIONAL REPLACEMENT SERVICE, INC.

Principal Place of Business	Mailing Address
5101 E. Busch Blvd., Suite 5 Tampa, FL 33617-5380	5101 E. Busch Blvd., Suite 5 Tampa, FL 33617-5380

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: APRIL 17, 1997

2. Principal Place of Business	2a. Mailing Address
21 SAME	26 SAME
Suite, Apt. #, etc. 22 SAME	Suite, Apt. #, etc. 27 SAME
City & State 23 SAME	City & State 28 SAME
Zip / Country 24 SAME / 25 HILLS-BOURGH	Zip / Country 29 SAME / 30 HILLS-BOURGH

4. FEI Number: 59-3440632 ☐ 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 XX No

9. Name and Address of Current Registered Agent

AMERILAWYER CHARTERD
343 ALMERIA AVENUE
CORAL GABLES, FL 33134

10. Name and Address of New Registered Agent

81 Name: HARVEY JOHN ROSSNAGLE
82 Street Address (P.O. Box Number is Not Acceptable): 5101 E. Busch Blvd., Suite 5
83
84 City: TAMPA, FL 85 Zip Code: 33617

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: Harvey J. Rossnagle Pres. APRIL 30, 1998
(Typed Registered Agent Signature required when filing) DATE

12. OFFICERS AND DIRECTORS

TITLE	P, S, T	XX DELETE
NAME	CONNIE MAE ROSSNAGLE	
STREET ADDRESS	5101 E. Busch Blvd., Suite 5	
CITY-ST-ZIP	Tampa, Fl 33617-5380	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	P, S, T	☐ Change XX Addition
12 NAME	HARVEY JOHN ROSSNAGLE	
13 STREET ADDRESS	5101 E. Busch Blvd., Suite 5	
14 CITY-ST-ZIP	Tampa, Fl 33617-5380	
21 TITLE		☐ Change ☐ Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		
31 TITLE		☐ Change ☐ Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE		☐ Change ☐ Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		☐ Change ☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

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14. I hereby certify that the information indicated on this report or supplemental 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.

SIGNATURE: Harvey J Rossnagle PRESIDENT 4/30/98 (813)985-4705
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #