

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P97000040812 (4)

1. Corporation Name

I.D.E.A.S. Consulting Group, Inc.

Principal Place of Business

Mailing Address

3920 Riverland Rd
Ft. Lauderdale FL 33312

3920 River

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/08/1997

2. Principal Place of Business

2a. Mailing Address

21 3920 Riverland Rd

26 3920 Riverland Rd

4. FEI Number

65-0528762

Applied For

Not Applicable

Suite, Apt #, etc

Suite, Apt #, etc

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

22 City & State

27 City & State

23 Ft. Lauderdale FL

28 City & State

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

24 Zip

Country

29 Zip

Country

24 33312

25 USA

29

30

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

John Gandia
3920 Riverland Rd.
Ft. Lauderdale, FL 33312

81 Name

Fabian Basabe

82 Street Address (P.O. Box Number is Not Acceptable)

83 3920 Riverland Rd

84 City Ft. Lauderdale

FL

85 Zip Code

33312

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

Fabian Basabe

Signature of the person named as registered agent and, if applicable,

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE President ☒ DELETE

11 TITLE President ☒ Change ☐ Addition

NAME John Gandia

12 NAME Fabian Basabe

STREET ADDRESS 3920 Riverland Road

13 STREET ADDRESS 3920 Riverland Rd

CITY-STATE-ZIP Ft. Lauderdale

14 CITY-STATE-ZIP Ft. Lauderdale FL

TITLE Treasurer ☒ DELETE

21 TITLE Secretary/Treasurer ☒ Change ☐ Addition

NAME George Pearson

22 NAME Daniel Brismeur

STREET ADDRESS 2124 SW 52nd Ave

23 STREET ADDRESS 3920 Riverland Rd

CITY-STATE-ZIP Plantation FL

24 CITY-STATE-ZIP Ft. Lauderdale, FL 33312

TITLE Secretary ☒ DELETE

31 TITLE ☐ Change ☐ Addition

NAME Anne M. Berube

32 NAME

STREET ADDRESS 3920 Riverland Rd

33 STREET ADDRESS

CITY-STATE-ZIP Ft. Lauderdale FL

34 CITY-STATE-ZIP

TITLE ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition

NAME

4.2 NAME

STREET ADDRESS

4.3 STREET ADDRESS

CITY-STATE-ZIP

4.4 CITY-STATE-ZIP

TITLE ☐ DELETE

5.1 TITLE ☐ Change ☐ Addition

NAME

5.2 NAME

STREET ADDRESS

5.3 STREET ADDRESS

CITY-STATE-ZIP

5.4 CITY-STATE-ZIP

TITLE ☐ DELETE

6.1 TITLE ☐ Change ☐ Addition

NAME

6.2 NAME

STREET ADDRESS

6.3 STREET ADDRESS

CITY-STATE-ZIP

6.4 CITY-STATE-ZIP

TITLE ☐ DELETE

7.1 TITLE ☐ Change ☐ Addition

NAME

7.2 NAME

STREET ADDRESS

7.3 STREET ADDRESS

CITY-STATE-ZIP

7.4 CITY-STATE-ZIP

TITLE ☐ DELETE

8.1 TITLE ☐ Change ☐ Addition

NAME

8.2 NAME

STREET ADDRESS

8.3 STREET ADDRESS

CITY-STATE-ZIP

8.4 CITY-STATE-ZIP

TITLE ☐ DELETE

9.1 TITLE ☐ Change ☐ Addition

NAME

9.2 NAME

STREET ADDRESS

9.3 STREET ADDRESS

CITY-STATE-ZIP

9.4 CITY-STATE-ZIP

TITLE ☐ DELETE

10.1 TITLE ☐ Change ☐ Addition

NAME

10.2 NAME

STREET ADDRESS

10.3 STREET ADDRESS

CITY-STATE-ZIP

10.4 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.

SIGNATURE

BRISMEUR Daniel

8/21/98

954-587-0054

FILED

Oct 05 1998 8:00am
Secretary of State

CR2E034 (5/98)