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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P97000056165 (8)

INTRAFLEX, INC.

FILED Feb 11 1998 8:00am Secretary of State



Principal Place	of Business	Mailing Address			1 10911001 010 10111 10111 00111	. 84111 86161 81118 81181 11918	Beimi Brit 1861
12206 PASE		12208 PASEO WAY	2206 PASEO WAY				
COOPER CITY FL 33026		COOPER CITY FL 330	COOPER CITY FL 33026		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
					06/25/1997		
2. Principal Pla	ace of Business	2a. Mailing Address			4, FEI Number	T A	pplied For
21 26		26			65-0778880	N	ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	, , , ,	Additional
		27	-d <u></u>		C. Commond of Claros posited	Fee R	equired
City & State			City & State		6, Election Campaign Financing		May Be
Zip Country		28 Z _{ID}	Zip Country		Trust Fund Contribution		to Fees
24	25	29	30	riti y	 This corporation owes or has p Personal Property Tax due Jun 	-	langible
	9. Name and Address of Current		130]		10. Name and Address of New R		
C	ORPORATION SERVICE COMPA			81 Name			
	01 HAYS STREET	•		DO Chroni Ari	(D.O. Day Marsh as in Mar Assault	(E1-)	
TALLAHASSEE FL 32301-2525				B2 Street Ad	dress (P.O. Box Number is Not Accepta	able)	1
••			83				
				84 City		95 7:0	Code
				84 City		FL 85 Zip	Code
11. Pursuant to	the provisions of Sections 607.0502	2 and 607.1508, Florida Statu	les, the al	oove-named co	rporation submits this statement for the	purpose of changing i	ts registered
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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 registered age			d Agent signature req	uired when reinstating)	DATE	j
12.	OFFICERS AND	DELETE	13.	11.6	ADDITIONS/CHANGES TO OFF	Change	Addition
NAME	DILLMAN, DONALD		1.2 NA			Change	LJ Addition
STREET ADDRESS	12206 PASEO WAY			REET ADDRESS			
CITY-ST-ZIP	COOPER CITY FL 33026			TY-S1-ZIP			
TITLE	D DELETE		2.1 Ti			Change	Addition
NAME	SOKOLOFF, ERIC		2.2 N	AME		•	1
STREET ADDRESS	4911 NW 84 RD.		2.3 \$1	REET ADDRESS			
CITY-ST-ZIP	CORAL SPRINGS FL 33067		2.4C	ITY-ST-ZIP			
TITLE	D DELETE		3.1 TI	TLE		Change	Addition
NAME	MAZURK, MICHAEL		3.2 NA	AME			
STREET ADDRESS	9151 NW 68 LN.		3.3 ST	HEET ADDRESS			-
CITY-ST-ZIP	PARKLAND FL 33067	—————————————————————————————————————		TY-ST-ZIP			
TITLE		☐ DELETE	4.1 TI			Change	Addition
NAME			4. 2 N				-
STREET ADDRESS			4 3 S1	REET ADDRESS			
CITY-ST-ZIP		Doneste		1Y-ST-7IP			1.00000
TITLE		☐ DELETE	5.1 10			☐ Change	Addition
NAME			5.2 NA				
STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP		☐ DELETE		TY-ST-ZIP		Change	Addition
TITLE			6.1 TI			□ Change	r woomen
NAME PROFEST ADDRESS			6.2 NA				*
STREET ADDRESS				REET ADDRESS			'
14. I hereby co	ertify that the information supplied wit	th this filing does not qualify t		TY-S1-ZIP emption stated in	n Section 119.07(3)(i), Florida Statutes.	I further certify that the	Information
وأسمام مناسما	a this applied compet or supplemental	Langual remark in true and on	Ourato and	tahat mu alanat	turn shall have the came local offect as	if manda undar anth, the	attended 1

indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it 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.