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



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

DOCUMENT # P97000077022 (6)

ALLISON INTERNATIONAL INC.

FILED Sep 17 1998 8:00am Secretary of State



Principal Piace of Business 2a, Maling Address					
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25 28 30 Personal Property Tax due June 30 196 No	Zip Country		Countr		
9. Name and Address of Current Registered Agent ALLISON, ABRAHAM 705 SW PORTH PLACE FORT LAUDERDALE FL 33312 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 65 Zip Code 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 agent. In the State of Horida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. In the State of Horida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. In the Provision of products of the purpose of changing its registered agent. In the purpose of				•	
ALUSON, ABRAHAM 705 SW FORTH PLACE FORT LAUDERDALE FL 33312 82 Street Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of sections 607:0502 and 607:1508, Florida Statutes, the earnest corporation submits this statument 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, and familiar with, and accept get oilligations of, section 67:0505, Florida Statutes. SIGNATURE SIGNATURE 12. OFFICIERS AND DIRECTORS 13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE Abraham System Addition 15 STREET ADDRESS 25 STREET ADDRESS 2		A	<u> </u>		
705 SW FORTH PLACE FORT LAUDERDALE FL 33312 82 Sireet Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code 11. Pursuant to the provisions of section, 657 1502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, section 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, section 607 0505, Florida Statutes 84 City FL 95 Zip Code 11. Pursuant to the purpose of changing its registered agent. I am familiar with, and accept the obligations of, section 607 0505, Florida Statutes 85 GNATURE 12. POSTAGE profess have already-level spinic action for sections 607 0505, Florida Statutes 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. THE		:	81	Name	
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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, and manifel with, and accept the obligations of, section 607,0505, Florida Statutorized by the corporation's board of directors. I hereby accept the appointment as registered agent and the manifel with, and accept the obligations of, section 607,0505, Florida Statutorized by the corporation's board of directors. I hereby accept the appointment as registered agent and the manifel with, and accept the obligations of, section 607,0505, Florida Statutorized by the corporation's board of directors. I hereby accept the appointment as registered agent and the manifel with a provided manifeld of directors. I hereby accept the appointment as registered agent agent and the provision of the provision	•		84	4 City	EI 85 Zip Code
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	CITY-ST-ZiP	this filing does not qualify the			ction 119 07(3)(i) Florida Statutes, I further certify that the information

I. 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 the small amount of the consortation or the receiver or trustee employed in the 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 additional contents.

954-

956-779-1616