

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 08, 2002 8:00 am
Secretary of State

09-08-2002 90131 032 ***550.00

DOCUMENT # P97000096312

1. Entity Name
INTERNATIONAL BID SERVICE, INC.

Principal Place of Business

**3700 CREIGHTON RD
 SUITE #4
 PENSACOLA FL 32504**

Mailing Address

**P.O. BOX 88608
 PENSACOLA FL 32524**

871069



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 11608

Suite, Apt. #, etc.

City & State

Pensacola, FL

4. FEI Number

59-3477958

Applied For

Not Applicable

Zip

Country

32524

Country

Escambia

5. Certificate of Status Desired

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**JESMONTH, RICHARD E
 217 A EAST INTENDENCIA ST
 PENSACOLA FL 32501**

7. Name and Address of New Registered Agent

Name **Goldstein, Gerald R**
 Street Address (P.O. Box Number is Not Acceptable)
1146 Ceylon Court
 City **Gulf Breeze** FL Zip Code **32563**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

8-13-02

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$550.00
 After September 13, 2002 Fee will be \$750.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

| | | |
|--|---|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP JESMONTH, RICHARD E 217 A EAST INTENDENCIA ST PENSACOLA FL 32501 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P GOLDSTEIN, GERALD R 3300 N PACE BLVD., STE. 507 PENSACOLA FL 32505 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | M.D. GUPTA, SUNIL 289 PLANTATION HILL RD GULF BREEZE FL 32561 | <input checked="" type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | S ANTOUN, FREDERIC 4857 LETTERKENNY ROAD, W CHAMBERSBURG PA 17201-8789 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T ROPELEWSKI, LEE J 4400 BAYOU BLVD, SUITE 39B PENSACOLA FL 32501 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|--|---|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP Ropelewski, Lee J 1463 Sanibel Lane Gulf Breeze, FL 32561 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P Goldstein, Gerald R 1146 Ceylon Court Gulf Breeze, FL 32563 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | S Goodman, Ross M. 3600 Menendez Drive Pensacola, FL 32503 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T Antoun, Frederic 4857 Letterkenny Rd., W Chambersburg, PA 17201-8789 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-13-02

Date

Daytime Phone #

CR2E034 (4/02)