

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

FILED
Feb 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000101736 (1)

1. Corporation Name
INDUSTRY INFORMATION SERVICES, INC.

Principal Place of Business

1231 SOUTH HIGHWAY 17-92
LONGWOOD FL 32750

Mailing Address

1231 SOUTH HIGHWAY 17-92
LONGWOOD FL 32750



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 5104 N Orange Blossom Trail Suite, Apt. #, etc. 22 205 City & State 23 Orlando FL Zip 24 32810 Country 25 Orange	2a. Mailing Address 26 5104 N Orange Blossom Trail Suite, Apt. #, etc. 27 205 City & State 28 Orlando FL Zip 29 32819 Country 30 Orange	3. Date Incorporated or Qualified 12/03/1997 4. FEI Number 59-3479655 Applied For Not Applicable 5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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9. Name and Address of Current Registered Agent

BRENNAN, PEGGY
1231 SOUTH HIGHWAY 17-92
LONGWOOD FL 32750

10. Name and Address of New Registered Agent

81 Name Brennan, Peggy
82 Street Address (P.O. Box Number is Not Acceptable) 5104 N. Orange Blossom Trail
83 Suite 205
84 City Orlando FL 85 Zip Code 32819

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

P.L. Brennan

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P Director of Sales	1.1 TITLE	
NAME	MCKINNON, CHERYL L	1.2 NAME	
STREET ADDRESS	259 CHURCHILL DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	LONGWOOD FL 32779	1.4 CITY-ST-ZIP	
TITLE	V C F O Director of operations	2.1 TITLE	
NAME	BRENNAN, PEGGY L	2.2 NAME	
STREET ADDRESS	7736 HIGH PINE	2.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32819	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-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:

P.S. Brennan

2-04-98 (407) 532-7314

CR2E034 (10/97)