


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

**FILED**  
**Apr 15, 1999 8:00 am**  
**Secretary of State**

04-15-1999 90114 002 \*1,050.00

PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P98000005353			
1. Corporation Name International Sales Group - The Courts at South Beach, Inc			
Principal Place of Business 1323 S.E. 3rd Ave. Ft. Lauderdale, FL 33316		Mailing Address 1323 S.E. 3rd Ave. Ft. Lauderdale, FL 33316	
2. Principal Place of Business 21 3390 N.E. 190 <sup>th</sup> St. Suite, Apt. #, etc.		2a. Mailing Address 26 3390 N.E. 190 <sup>th</sup> St. Suite, Apt. #, etc.	
22 City & State 23 Aventura, Florida 24 Zip 33180 25 Country U.S.A.		27 City & State 28 Aventura, Florida 29 Zip 33180 30 Country U.S.A.	
9. Name and Address of Current Registered Agent Staci Genet, Esp. 1323 S.E. 3rd Ave. Ft. Lauderdale, FL 33316		10. Name and Address of New Registered Agent 81 Name Staci Genet, Esp. 82 Street Address (P.O. Box Number is Not Acceptable) 2875 N.E. 191st St. 83 Suite 500 84 City Aventura FL 85 Zip Code 33180	
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE NAME Spiegelman, Philip STREET ADDRESS 1305 S.E. 2nd Street CITY-ST-ZIP Ft. Lauderdale, FL 33301 1.2 TITLE NAME Nicholas P. Grossi STREET ADDRESS 3600 Mystic Pointe Dr. Unit 517 CITY-ST-ZIP Aventura, Florida 33180 1.3 TITLE NAME Secretary/Treasurer STREET ADDRESS Craig S. Studnick CITY-ST-ZIP 3400 N.E. 192nd St. #2007 Aventura, Florida 33180		1.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP 1.2 TITLE NAME STREET ADDRESS CITY-ST-ZIP 1.3 TITLE NAME STREET ADDRESS CITY-ST-ZIP 1.4 TITLE NAME STREET ADDRESS CITY-ST-ZIP 1.5 TITLE NAME STREET ADDRESS CITY-ST-ZIP 1.6 TITLE NAME STREET ADDRESS CITY-ST-ZIP 1.7 TITLE NAME STREET ADDRESS CITY-ST-ZIP 1.8 TITLE NAME STREET ADDRESS CITY-ST-ZIP 1.9 TITLE NAME STREET ADDRESS CITY-ST-ZIP 1.10 TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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, with all other like empowered.

SIGNATURE:  2/24/99. 305-931-6511  
Philip Spiegelman, President

CR2E034 (11/98)