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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000063738

FILED Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90057 024 ***150.00

INTERNA	ATIONAL SEARCH CORP.							
Principal Plac	e of Business	Mailing Address					90110 WITON (ITEL 18091	i (1) &1 1 B11 1 6 B 1
5254 SADDLEBROOK WAY WESLEY CHAPEL FL 33543 5254 SADDLEBROOK WAY WESLEY CHAPEL FL 33543						DO NOT WRITE IN 1	THIS SPACE	
						Date Incorporated or Qualifed	THO OF FOL	
						07/17/1998		
2 Principal P	lace of Business	2a. Mailing Address				4. FEI Number	I An	plied For
21	ideo di Basilless	26				59-3524573		t Applicable
Suite, Apt.	Suite, Apt. #, etc.					\$8.75		
27						5. Certifcate of Status Desired	Fee Re	
City & Stat	e	City & State	ity & State			6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution	Added t	
Zip	Country	Zip	Country	,		8. This corporation owes the current year	r Intangible	
24	25	29	30			Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Currer	nt Registered Agent				10. Name and Address of New Registe	red Agent	
055	MAN BRIDE		[81	Name				
GERMAN, BRUCE			82	Street	Addres	s (P.O. Box Number is Not Acceptable)		
	SADDLEBROOK WAY		[-					
WES	SLEY CHAPEL FL 33543		83					•
			84	City			85 Zip C	Code
			99	City			FL 85 Zip (2008
SIGNATURE	Signature, typed or printed name of registered ages OFFICERS AN	nt and title if applicable. (NOTE: #	Registered Age	nt signature r		then reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	S AND DIRECTO	RS IN 12
TITLE	☐ DELETE		1.1 TITLE	1.1 TITLE		RESIDENT	Change	Addition
NAME			1.2 NAME		BR	RESIDENT BULE GERMAN SY SADDLE BROOK WAY		
STREET ADDRESS			1.3 STREE	T ADDRESS	53	54 SADDLE DRUM WAY		
CITY-ST-ZIP			1.4 CITY-S	T-ZIP	we	sley charel, FL 335	43	
TITLE		☐ DELETE	2.1 TΠLE		Vic	E PRESIDENT	Change	Z-Addition
NAME			2.2 NAME		SH	ARON ROBERTSON		
STREET ADDRESS			2.3 STREE	T ADDRESS	181	109 GERACI ROAD		
CITY-ST-ZIP				ST-ZIP	Lu	tz, FL 33549		
TITLE		☐ DELETE	3.1 TITLE			•	Change	☐ Addition
NAME	3.		3.2 NAME					
STREET ADDRESS			3.3 STREE	T ADDRESS			•	
CITY-ST-ZIP			3.4. CITY-	ST-ZIP		·		
TITLE		☐ DELETE	4.1 TITLE				Change	☐ Addition
NAME			4 2 NAME					
STREET ADDRESS			4.3 STREE	T ADDRESS	1			
CITY-ST-ZIP			4.4 CITY- S	T-ZIP	1			
TITLE		☐ DELETE	5.1 TITLE				☐ Change	Addition
NAME			5.2 NAME	T 4DD0500		•		
STREET ADDRESS			i .	T ADDRESS				
CITY-ST-ZIP		□ DELETE	5.4 CITY-S 6.1 TITLE	I-ZP	┼		Change	Madilic-
TITLE		☐ DELETE	6.2 NAME				Change	Addition
NAME			1	T ADODESE	ĺ			
STREET ADDRESS				T ADORESS	1			
CITY-ST-ZIP			6.4 CITY-S	I-ZIP	1			

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, with all other like empowered.

SIGNATURE: