

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

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

02-09-1999 90035 023 ***158.75

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P98000075739

1. Corporation Name
IVES MART., INC.



Principal Place of Business 1150 E. HALLANDALE BCH BLVD., SUITE A HALLANDALE FL 33009	Mailing Address 1150 E. HALLANDALE BCH BLVD., SUITE A HALLANDALE FL 33009
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/31/1998	Applied For <input type="checkbox"/> Not Applicable
4. FEI Number 65-0864622	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
8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

16. Principal Place of Business	2a. Mailing Address
17. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.
18. City & State	28. City & State
24. Zip	29. Zip
25. Country	30. Country

9. Name and Address of Current Registered Agent

OSHINSKY, LEONARD
1150 E. HALLANDALE BCH BLVD., SUITE A
HALLANDALE FL 33009

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

NAME	TITLE	<input type="checkbox"/> DELETE
SHEHADEH, ABDEL K		
STREET ADDRESS		
5324 NW 60TH DR.		
CITY-ST-ZIP		
CORAL SPRINGS FL 33067		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 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 as an attachment with an address with all other like empowered.

SIGNATURE: *Abdel K. Shehadeh* **REQUIRED**

Date: Jan 20, 1999 (999) 610-1972
Daytime Phone #

CR2E034 (1/198)