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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000095645

1. Corporation Name

INTERRAL SALES, INC.

Principal Place of Business

Mailing Address

1313 S MILITARY TRAIL #183 DEERFIELD BEACH FL 33442

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FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90184 035 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed 11/09/1998 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 9900 W. SAMPLE ROAD 65-0876363 9900 W, SAMPLE Not Applicable \$8.75 Additional 5. Certifcate of Status Desired 300 Fee Required SUITE <u> 300</u> 6. Election Campaign Financing City & State \$5.00 May Be ORAL SORING Added to Fees Trust Fund Contribution ountry This corporation owes the current year Intangible USA Personal Property Tax. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent DIGIACOMO, RALPH JR Street Address (P.O. Box Number is Not Acceptable)
9900 W. SAMPLE KOAD 1313 S MILITARY TRAIL #183 **DEERFIELD BEACH FL 33442** 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 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, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE SIGNATURE Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ☐ DELETE TITLE 1.1 TITLE DIGIACOMO, RALPH JR 1.2 NAME NAME 9900 W. SAMPLE ROAD, SUITE 300 CORAL SPRINGS, FL 33065 1313 S MILITARY TRAIL #183 1.3 STREET ADDRESS STREET ADDRESS **DEERFIELD BEACH FL 33442** CITY-ST-ZIP 14 CITY-ST-ZIP DELETE ☐ Addition 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition □ DELETE TITLE 4.1 TITLE NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP □ DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADORESS STREET ADDRESS 5,4 CITY-ST-ZiP CITY-ST-ZIP ☐ DELETE 6.1 TITLE Change ☐ Addition TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

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 of 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 chapted, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

RAZAN DIGIACOMO Sr. SIGNATURE AND TYPEDOR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/98)