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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED

Feb 17, 1999 8:00am

Secretary of State

02-17-1999 90044 016 ***150.00

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # S15507

IRBIS INTERNATIONAL, INC.

Principal Place of Business			Mailing Address					1 78811018 107 718					
7027 W BROWARD BLVD			7027 W BROWARD BLVD										
SUITE 208 PLANTATION FL 33317			SUITE 208										
			PLANTATION FL 33317					DO NOT WRITE IN THIS SPACE					
US		US	i				3	. Date Incorporated	or Qualifed	t e	•	4, 17	
							┵.	11/30/1990 FEI Number					-
2. Principal Place of Business			2a. Mailing Address								<u> </u>	plied For ot Applicable	- 8
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Suite, Apt. #, etc.			Suite, Apt. #, etc.				5	Certifcate of Statu	s Desired		Fee Re		
22			27 City & State			+-		F1 .1				┨	
City & State			City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees							
23			Zip Country				This corporation owes the current year intangible					101000	1
Zip	Country		Ζip	30	ariu y		8	Personal Property		sin year ii	Yes	□No	
24	9. Name and Address of Current	29	stored Agent	30]			10). Name and Addre		eaistere			1
	9. Name and Address of Current	Regis	stered Agent		81	Name	-10	, Hamo una statio	00 0,				1
ENTIN, RICHARD C.							•						-
8411 W. OAKLAND PARK BLVD. SUNRISE FL 33351						Street Address (P.O. Box Number is Not Acceptable)							
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					84	City					Zip	Code	
4 - 1 - 1 - 1 - 1 - 1 - 1	to the provisions of Sections 607.0502	\ C	207 1500 Florida Statut	on the c	hove	named corr	poratio	on cubmite this state	ment for the	nurnose (of changing its	registered	1
affina ar r	agistared agent or both in the State (of Flori	da. Such change was a	uthorizei	ก่อง	the corporati	ion's t	poard of directors.	nereby accep	it the appr	ointment as re	gistered	
agent. I a	m familiar with, and accept the obligat	ions of	, Section 607.0505, Flo	rida Stat	tutes	•		•	1	,			
SIGNATURE			/6	. Bogistoros	d Acor	at clarature require	ad whar	reinstating)		DATE			
40	Signature, typed or printed name of registered agent OFFICERS ANI			13.		it signature require	64 W 101	ADDITIONS/CHAN	GES TO OF		ND DIRECTO	ORS IN 12	8
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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.