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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 24 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

\$ S27325

(7)

INTERNATIONAL POWER SEMICONDUCTORS, INC.

Principal Place of Business Mailing Address						.011 B1011 D1011 B1811 B1811 1691	
1717 NORTH BAYSHORE DR. 1717 NORTH BAYSHORE			AYSHORE DR.				
SUITE 207 MAIMI FL 33	129	SUITE 207 Maimi FL 3313;	1		DO NOT WRITE IN THI	DO NOT WRITE IN THIS SPACE	
MAIMI LE 20135			<u>:</u>	3. Date Incorporated or Qualified			
					01/24/1991		
2. Principal F	Place of Business	2a. Mailing Add	2a. Mailing Address		4. FEI Number	Applied For	
21		26			65-0237637	Not Applicable	
Suite, Apt. #, etc.		—	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred	
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28	28		Trust Fund Contribution	Added to Fees	
Zip	Country Zip		Cour	ntry	8. This corporation owes or has paid the current year Intangible		
24	25 29 29 9, Name and Address of Current Registered Agent		30		Personal Property Tax due June 30. Yes No		
		ant Hegistered Agent		81 Name	10. Name and Address of New Registers	d Agent	
ROSALES, SALVADOR JR.				Name			
1717 NORTH BAYSHORE DR.				82 Street Ad	dress (P.O. Box Number is Not Acceptable)		
SUITE 3050 MIAMI FL 33132				83			
MI	MMI FL 33132		Ĺ				
			1	84 City	F	85 Zip Code	
11. Pursuant	to the provisions of Sections 607.05	002 and 607.1508, Flori	da Statutes, the ab	ove-named co	rootation culmite this statement for the purpose	of changing its registered	
Office of t	registered agent, or both, in the Statum familiar with, and accept the oblig	te of Horida. Such char	ige was authorized	by the corner.	ation's board of directors. I hereby accept the a	opointment as registered	
SIGNATURE	and accopy the con	ganons or, occitor our,	COCC, Florida Giata	itos.			
SIGNATURE	Signature: typed or printed nan e of registered ag	gent and title if applicable	(NO1E: Registered	Agent signature req	uired when reinstating) DATE		
12.	, _	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AT	ND DIRECTORS IN 12	
TITLE	D	LJ DE	ELETE 1.1 TITL	.E		☐ Change ☐ Addition	
ROSALES, SALVADOR JR.			1.2 NAME				
STREET ADDRESS 1717 NO. BAYSHORE DR.			1.3 STREET ADDRESS				
CITY-ST-ZIP	MIAMI FL			Y-ST-ZIP			
TITLE	DOCALES CALVADOD SD	□ DE		i		Change Addition	
NAME	ROSALES, SALVADOR SR.		2.2 NAME				
STREET ADDRESS 1717 NO. BAYSHORE DR.			2.3 STREET ADDRESS			ı	
CITY-ST-ZIP TITLE	MIAMI FL	DE		Y-ST-ZIP		T 60 T 2100	
NAME		[_] Ut				Change Addition	
STREET ADDRESS			3.2 NAN				
CITY-ST-ZIP			1	EET ADDRESS			
TITLE		□ DE		Y-ST-ZIP		☐ Change ☐ Addition	
NAME			4, 2 NAM	!		Criange C Addition	
STREET ADDRESS				ŀ			
CITY-ST-ZIP				EET ADDRESS '- ST - ZIP			
TITLE		DE				Change Addition	
NAME			5.2 NAM				
STREET ADDRESS				ET ADORESS			
CITY-ST-ZIP			5.4 CITY	ľ			
TITLE		☐ DE				Change Addition	
NAME			6.2 NAM				
STREET ADDRESS				ET ADDRESS		į	
			0.5 5111	E. ADDI ILOG			

14. I hereby certify that the information supplied with this filing foes 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 eath; that I am an officer or director of the corporation or the receiver or fruitee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with a receiver