May 07, 1999 8:00 am Secretary of State

05-07-1999 90107 019 ***150.00

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 # S58320

1. Corporation Name

INTERNATIONAL FOLLITY INVESTMENTS INC

INTERN	ATIONAL EQUIT INVESTIG							
Principal Plac	e of Business	Mailing Address						
46 N. WASHINGTON BLVD. SARASOTA FL 34236 46 N. WASHINGTON BLVD. SARASOTA FL 34236 SARASOTA FL 34236					DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed 06/10/1991			
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number	L	Applied For	
21		26			65-0307720		Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	· -	.75 Additional ee Required	
City & Star	te	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country 25	Zip 31	Country		This corporation owes the current yea Personal Property Tax.	r Intangible		
2-7	9. Name and Address of Currer		<u> </u>		10. Name and Address of New Registe	red Agent		
			81	Name			•	
PATTERSON, JOHN			82	82 Street Address (P.O. Box Number is Not Acceptable)				
46 N. WASHINGTON BLVD.			02	Oli Gel Add	gross (1 . C. Box Humbor to Not Nosspies-2)			
#1 SARASOTA FL 34236			83					
			84	City		FL 85	Zip Code	
office or i	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was auth	ionzed by	tne corporat	poration submits this statement for the purpos- tion's board of directors. I hereby accept the ap-	e of chang ppointment	ing its registered t as registered	
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE: Re	egistered Ager	nt signature requir	red when reinstating) DATE			
12.	OFFICERS AND DIRECTORS 13				ADDITIONS/CHANGES TO OFFICERS			
TITLE	PSTD	PSTD DELETE 1.				□ CI	hange	
NAME	GEBHARD, H. DIETER		1.2 NAME	Ì				
STREET ADDRESS	DDRESS 1858 RINGLING BLVD 1.3		1.3 STREE	ADDRESS				
CITY OT 710	SARAASOTA FL		1.4 CITY-S	T-ZIP				

ORS IN 12 Addition Addition Change 2.1 TITLE ☐ DELETE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change Addition 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change □ DELETE 4,1 TITLE TITLE 4.2 NAME **TMAM** 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Addition DELETE Change 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Change Addition DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 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 on an appear with an address, with all other like empowered.

SIGNATURE: