

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 31 AM 11:05

DOCUMENT # S62042

(4)

1. Corporation Name

I & S REALTY, INC.

Principal Place of Business

6365 NW 6TH WAY
STE 160
FT LAUDERDALE FL 33309
US

Mailing Address

6365 NW 6TH WAY
STE 160
FT LAUDERDALE FL 33309
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/25/1991

3a. Date of Last Report

01/27/1994

4. FEI Number

65-0270888

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,

Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21 441 South Federal Hwy

Suite, Apt. #, etc.

2a. Mailing Address

26 441 South Federal Hwy

Suite, Apt. #, etc.

City & State

23 Deerfield Beach, FL

Zip

24 33441

Country

25 U.S.A.

City & State

28 Deerfield Beach, FL

Zip

29 33441

Country

30 U.S.A.

9. Name and Address of Current Registered Agent

SUHANDRON, KENNETH
6365 NW 6TH WAY, STE 160
FT LAUDERDALE FL 33309

10. Name and Address of New Registered Agent

81 Name

Suhandron, Kenneth

82 Street Address (P.O. Box Number is Not Acceptable)

441 South Federal Hwy

83

84 City

Deerfield Beach

FL

85 Zip Code

33441

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 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

[Signature]

11 MARCH 23, 1995

Signature, typed or printed name of registered agent and date of appointment

DATE Registered Agent Signature required when resigning

DATE

12. OFFICERS AND DIRECTORS

TITLE	PST
NAME	SUHANDRON, KENNETH
STREET ADDRESS	6365 NW 6TH WAY, #160
CITY, ST, ZIP	FT LAUDERDALE FL
TITLE	D
NAME	SUHANDRON, KENNETH
STREET ADDRESS	6365 NW 6TH WAY #160
CITY, ST, ZIP	FT LAUDERDALE FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	Suhandron, Kenneth
1.3 STREET ADDRESS	441 S. Federal Hwy
1.4 CITY, ST, ZIP	Deerfield Beach, FL 33441
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY, ST, ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY, ST, ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY, ST, ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY, ST, ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 119.01(2)(b), 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 person or person 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, in an event of removal with or without cause.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11 MARCH 23, 1995 205 428 900