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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S66303

(6)

IAC FINANCIAL SERVICES, INC.

Principal Place of Business

Mailing Address

FILED Feb 28 1997 8:00am Secretary of State



6121 BALBOA CIRCLE. #104 BOCA RATON FL 33433		6121 BALBOA CIRCLE, #104 BOCA RATON FL 33433-8171		·		
US		US			1	
				3. Date Incorporated or Qualified 07/15/1991	3a. Date of Last Report 04/02/1996	
	ace of Business	2a, Mailing Address		4, FEI Number	Applied For	
21 900	SE 8 Avenue	26		65-0277867	Not Applicable	
Suite Apt. # 22 *202	#. etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23 Deer	field Beach, Fl.	28		Trust Fund Contribution	Added to Fees	
Zıp	Country	Zip	Country	8. This corporation has liability for in	ntangible tax under s. 199.032,	
24 334	41 25 Broward	29	30		Yes 🔀 No	
	g. Name and Address of Current	Registered Agent		10. Name and Address of New Re	gistered Agent	
MARCUS, IRWIN 81 Name Bates Harring						
AND DALDON CIDOLE AND			82 Street A	Belsy Marcus 82 Street Address (P.O. Box Number is Not Acceptable)		
BOCA RATON FL 33433			311 991 A	900 SE 8 Avenue		
83				20 24 0 /////		
9				wite 202		
			84 City	ChaQ - c	FL 85 Zip Code	
office or re	egistered agent, or both, in the State of	of Florida. Such change was au	ithorized by the corpo	orporation additions this statement to the poration's board of directors. I hereby accept	t the appointment as registered	
11. Pursuant to the provisions of Soctions 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 ,	frest // fuce	u Betsy	Marcus		2/21/97	
			Registered Agent signature re		DATE	
12.	PD OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFICE	Change Addition	
	MARCUS, BETSY	D DECERT			Citalige	
NAME				N 1 27 1		
STREET ADDRESS	6121 BALBOA CIRCLE, #104		1.3 STREET ADDRESS	ejzi bajboa Circle		
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY-ST-ZIP	boca Katon, Fl. 3	3433	
TITLE		☐ DEŁETE	2.1 TITLE	•	Change L Addition	
NAME.			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS		j	
CITY-SI-ZIP			2. 4 CITY-ST-ZIP			
TITLE		DELETE	3.1 TITLE		Change Addition	
NAME			3.2 NAME		· · ·	
STREET ADDRESS			3 3 STREET ADORESS			
CITY-ST-ZIP			34. CITY-ST-ZIP			
THILE		DELETE	4.1 TITLE	**************************************	Change Addition	
NAME			4 2 NAME			
STREET ADDRESS			43 STREET ADDRESS			
CITY-ST-ZIF			4.4 CiTY-ST-ZIP			
Title		☐ DELETE	5.1 TIFLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
1					1	
CITY-ST-7IP		☐ DELETE	5.4 CITY - ST - ZIP	***************************************	Change Addition	
TITLE		רון טנגנוג <u>י</u>	6.1 TITLE		CT CHARGE CT VOCIDOR	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
C/TY-ST-ZIP			6.4 CITY-S1-ZIP			
[14. Too hereb	by certify that the information supplied	with this filing does not qualify	ritor the exemption sta	ated in Section 119.07(3)(i), Florida Statute	s. 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 decider 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 13 if changed, or on an attachment with an address.

SIGNATURE: