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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

1. Corporation Name

S96298

(2)

INVESTORS FINANCIAL SERVICES INC.

INVE	STURS FINANCIAL SERVICE	3, INC.						
Principal Plac	ce of Business	Mailing Address	 			HAR HORA IDADA IDAL DEBII	DIDIN BIBIN BIBIN	ELBHI DIDIN HODA
14498 S. TAMIAMI TRAIL		P.O. BOX 07430						
FT. MYERS FL 33912		FT. MYERS FL 33919						
US		US			3. Date Incorporated or	Qualified 3a f	ate of Last Re	enort
					3. Date Incorporated of 11/22/1991	Godinico Ga. E	05/01/199	95°°
2. Principal Place of Business		2a. Mailing Address			4. FEI Number 65-0304136		⊢ −+-	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status	Desired		Additional Required
City & State		City & State		6. Election Campaign F	-	\$5.00	May Be	
23 Zm	Country	Zip	Counti		Trust Fund Contribu	1011 —		to Fees
Zip 24	25:	29	30	У	8. This corporation has Florida Statutes	Yes 🛣 No		199.032,
<u></u> L	9. Name and Address of Curre		1521		10. Name and Address			
			8	1 Name	PERTY EXCHANGE N	DEMONDE TH	<u>~</u>	
	GH, PETER		8:	2 Street	Address (P.O. Box Number is No	ot Acceptable)		
	S. TAMIAMI TRAIL		<u> </u>	144	98 S. TAMIAMI TR	L		
FI. MI	YERS FL 33912		8:	3				
	_		В	4 City			85 Zg	Code
44 Discourse		2 and 607 1509. Florida Statut	ton the above		MYERS, proporation submits this statemen	t for the purpose of		912
or regist	tered agent, or both a war are of Flor	ida. Such change was authoriz	zed by the cor	poration's	board of directors. I hereby acci	apt the appointment	changing its re Las registered	agent. I am
		tion 607.0505, Florida Statutes	. 0				וא נכאנו	6
SIGNATURE	Signature Tree or hit India stered agen	INTUNU MOLDOVSKY It and title if applicable	OTE Registered Ag	ent signature r	equired when reinstating)	DATI	ודושאן	<i>Q</i>
12.		ND DIRECTORS	13.		ADDITIONS/CHANG	<u> </u>	ND DIRECTO	RS IN 12
TOLE	SID OUCKY ANTONI	☐ DELETE	1. 1 TITLE	F	V/5/	D	🗶] Change	■ Addition
NAME	MOLDOVSKY NATHAN 14498 S. TAMIAMI TRAIL		. 1.2 NAM	Ē				
STREET ADDRESS	FT. MYERS FL			ET ADDRESS				
CITY - ST - ZIP	PO	☐ DELETE	1.4 CITY - 2. 1 TITLI		P/T/D		X Change	Addition
TITLE NAME	BURKE, HARALD		2. 1 HILL 2.2 NAM		P/1/D		W1 cuante	☐ Roomon
STREET ADDRESS	14408 S TAMIAMI TRAII		2.3 STREET ADDRESS					
CITY - ST - ZIP	FT. MYERS FL		2.4 CITY					
TITLE	VPGC	▼ DELETE	3. 1 TITU				☐ Change	Addition
NAME	DORAGH, PETER		3.2 NAMI	ŧ				
STREET ADDRESS	S 14498 S. TAMIAMI TRAIL		3.3 STRE	ET ADORESS				
CITY+S1-ZIP	FT. MYERS FL		3 4 C)TY				——————————————————————————————————————	—
TITLE		☐ DELETE	4. 1 3/TL				Change	☐ Addition
NAME			4.2 NAM					
STREET ADDRESS	\$			ET ADDRESS				
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CiTY: 5. 1 TiTL				Change:	Addition
NAME		<u></u>	5.2 NAM					_
STREET ADDRESS	s			ET ADDRESS				
CITY - ST - ZIP			5.4 City	-ST-ZIP				
TITLE		☐ DELETE	6 1 TITL	E			Change:	Addition
NAME			62 NAM	Ε				
STREET ADDRÉSS	s		63 STRE	ET ADDRESS				
CITY-ST-ZIP	ab, and if, that the information as a limit	unit Bio files in valuated - 4	64 City	- ST - ZIP	olify for the everyation stated in S	Paction 119 07/9\/II-	Florida Statut	ac I further
14. I do ner certify th	eby certify that the information supplied hat the information indicated on this lat I am an officer or director of the	mth this filling is voluntarily furi	nisneo ano do nua! report is t	ine and ac	curate and that my signature sh	all have the same le	gal effect as if	made under
oath; th appears	at I am an officer or director of the fire s in Block 12 or Block 13 if charles	Vation or the receiver or truste on an attachment with an add	ee empowered dress.	o to execu	ie this report as required by Cha	pter 607, Florida Sta	atutes; and tha	at my name

SIGNATURE:

NATHAN MOLDONSKY SEC.

- 4/26/96 941-481 - 1800

CR2E034 (12/95)