

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

PROFIT CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # **V08958 (3)**  
1. Corporation Name

**IBK INVESTMENT & MANAGEMENT, INC.**



Principal Place of Business: **2439 ALOMA AVENUE SUITE 245 WINTER PARK FL 32792**  
Mailing Address: **P. O. BOX 4968 WINTER PARK FL 32793 US**

3. Date Incorporated or Qualified: **01/22/1992**  
3a. Date of Last Report: **02/10/1995**  
4. FEI Number: **59-3106625**  
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 **PO BOX 4968**  
22 Suite, Apt. #, etc.  
23 **Winter Park FL**  
24 **32793**  
25 **sem.**  
26 Mailing Address  
27 Suite, Apt. #, etc.  
28 City & State  
29 Zip  
30 Country

9. Name and Address of Current Registered Agent  
**KITOGRAD, IRA B.  
2439 ALOMA AVE.  
SUITE 245  
WINTER PARK FL 32792**

10. Name and Address of New Registered Agent  
81 Name: **Todd South**  
82 Street Address (P.O. Box Number is Not Acceptable): **Miller South + DIMASI**  
83 **20699 Lee Rd**  
84 City: **Winter Park** FL 85 Zip Code: **32789**

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:

**7/3/96**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	11 TITLE	12 NAME
<input type="checkbox"/> DELETE	<b>D KITOGRAD, IRA B. 2439 ALOMA AVE. #245 WINTER PARK FL</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE	<b>D KITOGRAD, MARTA E. 2439 ALOMA AVE. #245 WINTER PARK FL</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

**7/3/96 407 657-5517**

CR2E034 (3/96)