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 # V41587

(9)

INTERNATIONAL 2000, INC.

FILED Jan 15 1997 8:00am Secretary of State



Principal Place of Business	Mailing Ad	dress		g kollet okkobi binder stillet mittet kolle dielit dielit dielit dielit opiek bielit aufer ander ander		
125 BRIGHTWATER DR. CLEARWATER FL 34630	125 BRIGHTWATER DR. CLEARWATER FL 34630-2402					
				3. Date Incorporated or Qua		e of Last Report 6/1996
2. Principal Place of Business	2a. Mailing	Address		4, FEI Number		Applied For
21	26			59-3139122		Not Applicab
Suite, Apt. #, etc.	Suite, A	Apt #, etc.		5, Certificate of Status Desire	ed 🗆	\$8.75 Additional Fee Required
City & State	City & :	State		6. Election Campaign Finance	ina	\$5.00 May Be
23	28			Trust Fund Contribution	‴" 9	Added to Fees
Zip Country	Zip	Co	punity	a. This corporation has liabil	ity for intangible t	ax under s. 199.032,
24 25	29	30		Florida Statutes	Yes 🛮	
g. Name and Address of Co	urrent Registered A	gent	1	10. Name and Address of N	ew Registered A	gent
ZYKUS, JOSEPH			81 Name			
125 BRIGHTWATER DR.			82 Street Add	dress (P.O. Box Number is Not Ac-	ceptable)	
CLEARWATER FL 34630				· · · · · · · · · · · · · · · · · · ·		
			83			
			84 City			85 Zip Code
					FL	
office or registered agent, or both, in the agent, I am familiar with, and accept the of SIGNATURE Signature types or provide accept of the gate.	ed agent and tille & app.cabl	e (NOTE Register	red Agent signature requ	irred when reinstating)	DATE	
<u> </u>	S AND DIRECTORS	13		ADDITIONS/CHANGES TO		
TITLE P		•	TITLE		'	Change
NAME ZYKUS, JOSEPH STREET ADDRESS 125 BRIGHTWATER DR.		1	NAME			
ALFARMATED EL AZAGA			STREET ADDRESS			
TITLE VPT			CITY-ST-ZIP TITLE			Change Addition
NAME ZYKUS, LINDA			NAME		13.	
STREET ADDRESS 125 BRIGHTWATER DR.			STREET ADDRESS			
CITY-ST-ZIP CLEARWATER FL 34630		1	CITY-ST-ZIP			
THLE			TITLE			Change Addition
NAME			NAME		•	
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP			
TITLE			TITLE			Change Additi
NAME			NAME		,	
STREEF ADDRESS			STREET ADDRESS			
CITY - ST- ZIP		1	CITY-ST-ZIP			
TITLE			TITLE			Change Additi
NAME			NAME		·	
STREET ADDRESS			STREET ADDRESS			
CITY-ST-2IP			CITY-ST-ZIP			
TITLE			TITLE			Change Additi
NAME			NAME		·	
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP			
		■ 07	week 100 miles			

14. I do horeby 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 in physical corp an attachment with an address.

TRESIDENT

SIGNATURE:

JOSEPH ZYKUS

1/8/97 813-442-373