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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # V41587

(9)

INTERNATIONAL 2000, INC.				
Principal Place of Business	Mailing Address		1 1881 1 64614 81984 11881 6484 1884 1864 6164 6164 6164 6	TO II DIDIH 91814 DIDIH 1981
125 BRIGHTWATER DR. CLEARWATER FL. 34630	125 BRIGHTWATER DR. CLEARWATER FL 34630		DO NOT WRITE IN THIS S	PACE
			3. Date Incorporated or Qualified	
			06/05/1992	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21]	26		59-3139122	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country 24 33767 25	29 33767 30	ountry	This corporation owes or has paid the curre Personal Property Tax due June 30.	ent vear Intangible Yes
Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent	
ZYKUS, JOSEPH		B1 Name		
125 BRIGHTWATER DR. CLEARWATER FL 34630		82 Street Add	82 Street Address (P.O. Box Number is Not Acceptable)	
		83		
		84 City	FI	85 Zip Code

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, typied or printed name of registered agent and titln if applicable (NOTE Registered Agent's gneture required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 THILE Change Addition NAME ZYKUS, JOSEPH 1.2 NAME STREET ADDRESS 125 BRIGHTWATER DR. 1.3 STREET ADDRESS **CLEARWATER FL 34630** CITY - ST - ZIP 1.4 CITY - ST-ZIP DELETE TITLE **VPT** 2.1 TITLE Change Addition NAME ZYKUS, LINDA 2.2 NAME STREET ADDRESS 125 BRIGHTWATER DR. 2.3 STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 34630 2.4 CITY-ST-ZIP TITLE DELETE 3.1 10118 Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - \$1 - ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 51 TITLE Change ___ Addition NAME 5.2 NAMŁ STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - S1 - ZIP TITLE DELETE Change 6.1 THUE Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 64 CITY-ST-ZIP

14. Thereby 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 offect 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 if changed or on an attachment with an address

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3/98

812-442-3726

FILED

Jan 20 1998 8:00am

Secretary of State