FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90222 012 ***150.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # MAS1ES

 Corporation 	IAISON SERVICES, INC.							
Principal Place	of Business	Mailing Address			f ibats birait araba eireit einat üter	10 1101 01011 01011 0)1811 B B(B18))(010 2) (00 1
713 SE 7TH ST FT. LAUDERDALE FL 33301 US		713 SE 7 ST 790 E BROWARD BLVD SUITE 302 FT LAUD FL 36330		_	DO NOT WRITE IN THIS SPACE			
.		US		ļ	3. Date Incorporated or Qualifed 06/12/1992			
2 Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		App	lied For
	E 6 51	26 721 SE G	> ⁻ ST		65-0338777		Not	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		_			8.75 Ad	ditional
22	•	27			5. Certificate of Status Desired		Fee Req	uired
City & State		City & State			6. Election Campaign Financing		\$5.00 N	/lay Be
23 FT LA	UDERDALE, FL	28 FT. LAUDERY	PALE FL.		Trust Fund Contribution		Added to	Fees
Zip	Country	Zip	Country		8. This corporation owes the curre	ent year Intang	ible	
24 33301 25 USA 29 33301 3			O USA-		Personal Property Tax.			□No
Name and Address of Current Registered Agent					10. Name and Address of New R	egistered Age	nt	
	OLD, RICHARD		81 Name	ΔR	NOLD, RICHARD			
	82 Street	Addres	s (P.O. Box Number is Not Acceptal	ble)				
713 \$	7.	21	SE 6" ST					
FTL	AUDERDALE FL 33301		83					
			84 City				35 Zip Co	ode
		•	£		LAUDERDALE	FL i	73	301
11. Pursuant office or reagent. I as	to the provisions of Dections 607.0502 egistered agent, of both, in the State of m familiar with, and accept the obligat	(1-)(111MV	~ RICH	IRR.	io Arnoud 1	purpose of cha at the appointm	inging its n ent as regi	egistered istered
	Signature, typed or printed name of registered agent		egistered Agent signature r	required w		DATE	NDE OTO	O IN 40
12.	OFFICERS AN		13.	7	ADDITIONS/CHANGES TO OFF		Change	Addition
TITLE	P PIOUADD	☐ DELETE	1.1 TITLE		HARD ARNOLD		1 onungo	
NAME	ARNOLD, RICHARD		1.2 NAME	77	HART ARMOUNT			
STREET ADDRESS	713 S.E. 7TH ST.		1.3 STREET ADDRESS			7 3234		
C/TY-ST-Z/P	FT LAUDERDALE FL 33301	[*] DELETE	1,4 CITY-ST-ZIP	VP	LAUDERDALE, FO	<u>c - 30 30</u>	Change	☐ Addition
TITLE	VP	☐ DELETÉ	2.1 TITLE	VF	•	_	Jonango	
NAME	ARNOLD, KATHLEEN		2.2 NAME		IT HLEEN ARNOLD			
STREET ADDRESS	713 S.E. 7TH ST.		2.3 STREET ADDRESS		1 SE 6- ST			
CITY-ST-ZIP	FT LAUDERDALE FL 33301		2. 4 CITY-ST-ZIP	<u> </u>	LAUDERDALE F	<u>~ ~~</u>	Change	Addition
TITLE ~ ~	المهاي بالمحال الهايات المستسيسات	DELETE	3.1 TITLE	~~~				
NAME			3.2 NAME	ļ	· · · · ·	-		
STREET ADDRESS			3.3 STREET ADDRESS					
CITY-ST-ZIP			3.4. CITY-ST-ZIP	├] Change	Addition
TITLE		☐ DELETE	4.1 TITLE			L.	1 Ottalige	
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET ADDRESS		•			
CITY-ST-ZIP			4.4 CITY-ST-ZIP	├ ─] Change	Addition
TITLE		DELETE .	5.1 TITLE	1		L) our inde	r-1 vacation
NAME			5.2 NAME 5.3 STREET ADDRESS		•			
STREET ADDRESS				ŀ				
CITY-ST-ZIP		□ DELETE	5.4 CITY-ST-23P 6.1 TITLE	+			Change	Addition
TITLE		☐ DELETE	6.2 NAME			L	1 Augusta	
NAME								
STREET ADDRESS	•		6.3 STREET ADDRESS	1				

14. I hereby 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 if changed, or open attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

RICHMED ARNOLD 4/11/99