

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

**FILED**  
**Aug 17 1998 8:00am**  
**Secretary of State**

**PROFIT CORPORATION ANNUAL REPORT 1998**



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

**DOCUMENT # F96000005810 (4)**  
 1. Corporation Name  
**ISS ACTION, INC.**



Principal Place of Business: **J.F.K. INTERNATIONAL AIRPORT BLDG 80 JAMAICA NY 11430 US**  
 Mailing Address: **J.F.K. INTERNATIONAL AIRPORT BLDG 80 JAMAICA NY 11430 US**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
 21 Suite, Apt. #, etc  
 22 City & State  
 23 Zip Country  
 24 25  
 2a. Mailing Address  
 26 Suite, Apt. #, etc  
 27 City & State  
 28 Zip Country  
 29 30

3. Date Incorporated or Qualified  
**11/07/1996**  
 4. FEI Number  
**11-3075292** Applied For Not Applicable  
 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 owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent  
**DADE COUNTY CORPORATE AGENTS, INC. 20801 BISCAYNE BOULEVARD, SUITE 505 AVENTURA FL 33180**  
 81 Name  
 82 Street Address (P.O. Box Number is Not Acceptable)  
 83  
 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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 \_\_\_\_\_ (NEED Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS  
 TITLE **PD**  DELETE  
 NAME **DAPHNA, YEHUDA**  
 STREET ADDRESS **743 WEST BROADWAY WOODMERE NY 11598**  
 CITY - ST - ZIP  
 TITLE **V**  DELETE  
 NAME **CAPOWSKI, THOMAS**  
 STREET ADDRESS **241 BERRY HILL ROAD SYOSSET NY 11791**  
 CITY - ST - ZIP  
 TITLE **DST**  DELETE  
 NAME **NEWMAN, PAMELA**  
 STREET ADDRESS **743 WEST BROADWAY WOODMERE NY 11598**  
 CITY - ST - ZIP  
 TITLE  DELETE  
 NAME  
 STREET ADDRESS  
 CITY - ST - ZIP  
 TITLE  DELETE  
 NAME  
 STREET ADDRESS  
 CITY - ST - ZIP  
 TITLE  DELETE  
 NAME  
 STREET ADDRESS  
 CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
 1.1 TITLE  Change  Addition  
 1.2 NAME  
 1.3 STREET ADDRESS  
 1.4 CITY - ST - ZIP  
 2.1 TITLE  Change  Addition  
 2.2 NAME  
 2.3 STREET ADDRESS  
 2.4 CITY - ST - ZIP  
 3.1 TITLE  Change  Addition  
 3.2 NAME  
 3.3 STREET ADDRESS  
 3.4 CITY - ST - ZIP  
 4.1 TITLE  Change  Addition  
 4.2 NAME  
 4.3 STREET ADDRESS  
 4.4 CITY - ST - ZIP  
 5.1 TITLE  Change  Addition  
 5.2 NAME  
 5.3 STREET ADDRESS  
 5.4 CITY - ST - ZIP  
 6.1 TITLE  Change  Addition  
 6.2 NAME  
 6.3 STREET ADDRESS  
 6.4 CITY - ST - ZIP

**600002620526**  
**-08/20/98--01013--011**  
**\*\*\*150.00**  
*PL 8-17*

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 on the attachment with an address.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

CR2E034 (10/97)