

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 8, 1995.
AMOUNT DUE ON OR BEFORE 8/8/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # P94000047224 (8)

1. Corporation Name

INTERACTIVE PUBLISHING CORPORATION

Principal Place of Business

4524 WEST GUN CLUB ROAD
SUITE 101
WEST PALM BEACH FL 33415

Mailing Address

4524 WEST GUN CLUB ROAD
SUITE 101
WEST PALM BEACH FL 33415

FILED

95 JUL 14 AM 11:30

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

06/20/1994

3a. Date of Last Report

N/A

4. FEI Number

65-0513322

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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 1860 Old Okeechobee Rd.

Suite, Apt. #, etc.

22 SUITE 510

City & State

23 WEST PALM BEACH, FL

Zip

24 33409

Country

25 USA

2a. Mailing Address

26 1860 Old Okeechobee Rd.

Suite, Apt. #, etc.

27 SUITE 510

City & State

28 WEST PALM BEACH, FL

Zip

29 33409

Country

30 USA

9. Name and Address of Current Registered Agent

LONGENBERGER, CATHY
3933 QUAIL RUN DRIVE NORTH
BOYNTON BEACH FL 33438

10. Name and Address of New Registered Agent

81 Name

SARAH SHAMBLEAU

82 Street Address (P.O. Box Number is Not Acceptable)

4255 WEST HUMPHREY

83

APT. # 4411

84 City

TAMPA

FL

85 Zip Code

33614

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

Sarah Shambleau

Sarah Shambleau

7-6-95

Signature typed or printed name of registered agent (not filed if applicable)

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

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STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12:

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☒ Change ☐ Addition

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☐ Change ☐ Addition

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☐ Change ☐ Addition

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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Christopher Swallen

CHRISTOPHER SWALLEN

6/16/95

407-642-7790

Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number