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 # Pashonnsstas (2)

FILED Apr 03 1998 8:00am Secretary of State

	IT BUSINESS GROUP, INC	Mailing Address		 				
2600 ROOSE		2600 ROOSEVELT PLACE	¥					
SANIBEL FL 33957 SANIBEL FL 33957				DO NOT HIDE	DO NOT WRITE IN THIS SPACE			
						ACE		
				 Date Incorporated or Qualified 07/29/1995 	l			
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number		TAI	pplied For	
21		26		65-0603392		N	ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired			Additional	
22		27	.	5. Commode of dialog Desired		Fee A	equired	
City & Stat	te	City & State		6. Election Campaign Financing	_		May Be	
Zip	Country	28 Z _I p	Country	Trust Fund Contribution			to Fees	
24	<u> </u>	29	30	This corporation owes or has p Personal Property Tax due Jur	_		tangible ☑ No	
24	25 9. Name and Address of Curre		[30]	10. Name and Address of New R			<u> </u>	
GA	LANTE , ALICIA		81 Name					
	00 ROOSEVELT PLACE		82 Street Add	on (D.O. Boy M. webes in Not Assessed	-hla\			
SANIBEL FL 33957			62 Street Add	ress (P.O. Box Number is Not Accepta	ane)			
4/1			83					
			84 City			00 7	Conto	
			84 City		FL	85 Zip	Code	
SIGNATURE	Signature, typed or printed name of registered a	gent and lifts if applicable (NO	OTE Registered Agent signature requi	red when reinstaling) ADDITIONS/CHANGES TO OFF	DATE ICERS AND F	DIRECTOR	RS IN 12	
TITLE	PTD	DELETE	1.1 TITLE	/IDDITIONG OF INTIMALS TO CIT		Change	Addition	
NAME	ALICIA GALANTE		1.2 NAME					
STREET ADDRESS	2600 ROOSEVELT PLACE		13 STREET ADDRESS					
CITY-ST-ZIP	SANIBEL FL		1.4 CITY-ST-ZIP					
TITLE	VSD	DELETE	2.1 TITLE			Change	Addition	
NAME	CARL J GALANTE		2.2 NAME					
STREET ADDRESS	2600 ROOSEVELT PLACE		2.3 STREET ADDRESS					
CITY-ST-ZIP	SANIBEL FL		2. 4 CITY - ST - ZIP					
TITLE		☐ DELETE	3.1 TITLE		L.] Change	Addition	
NAME	•		3.2 NAME					
STREET ADDRESS			3.3 STREET ADDRESS					
CITY-S1-ZIP		I Dri cre	3 4. CITY - ST - ZIP			Change	Addition	
TITLE		☐ DELETE	4.1 TITLE		L	Change	L.J. ADDITION	
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET ADDRESS					
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE			Change	Addition	
NAME		L beach	5.2 NAME		L	_ onange	III Administr	
STREET ADDRESS			5.3 STREET ADDRESS					
			5.4 CITY-S1-ZIP					
CITY-ST-ZIP TITLE		DELETE	6.1 TITLE		Г	Change	Addition	
NAME		head cornells	6.2 NAME					
STREET ADDRESS			6.3 STREET ADDRESS					
CITY-ST-ZIP			6.4 CITY-S1-ZIP					
3111-31			2.4 OH COLEM					

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 an attachment with an address.