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Apr 30, 1999 8:00 am
Secretary of State

04-30-1999 90179 032 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # ~~P9800005354~~ P98000036538

1. Corporation Name

~~WEB-COMMERCE SOLUTIONS, INC.~~

OLD FLORIDA TITLE COMPANY

Principal Place of Business

Mailing Address

~~215 NORTH OCEAN BOULEVARD
 UNIT 201
 DEERFIELD BEACH FL 33441~~

~~215 NORTH OCEAN BOULEVARD
 UNIT 201
 DEERFIELD BEACH FL 33441~~



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

~~04/26/1998~~ 04/22/1998

4. FEI Number

Applied For
 Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 100 SE 6th Street

26 100 SE 6th Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 % Jeffrey Levy

27 % Jeffrey Levy

City & State

City & State

23 Ft. Lauderdale, FL.

28 Ft. Lauderdale, FL.

Zip

Country

24 33301

25 USA

Zip

Country

29 33301

30 USA

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 the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~AMERICAN
 3131 MERIDIAN AVENUE
 CORAL GABLES FL 33134~~

81 Name

Jeffrey B. Levy

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

100 SE 6th Street

83

84 City

Ft. Lauderdale FL

85 Zip Code

33301

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

Jeffrey B. Levy, President

4/26/99

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ~~CEO~~ DELETE
 NAME ~~CAROL MICHAELE~~
 STREET ADDRESS ~~215 NORTH OCEAN BOULEVARD~~
 CITY-ST-ZIP ~~DEERFIELD BEACH FL 33441~~

1.1 TITLE President Change Addition
 1.2 NAME Jeffrey B. Levy
 1.3 STREET ADDRESS 100 SE 6th Street
 1.4 CITY-ST-ZIP Ft. Lauderdale, FL. 33301

TITLE JOHN GAUDIOSI DELETE
 NAME
 STREET ADDRESS 3801 N. Federal Hwy
 CITY-ST-ZIP Pompano Beach, FL. 33064

2.1 TITLE Vice-President Change Addition
 2.2 NAME Stephan Cohen
 2.3 STREET ADDRESS 100 SE 6th Street
 2.4 CITY-ST-ZIP Ft. Lauderdale, FL. 33301

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

3.1 TITLE Change Addition
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

4.1 TITLE Change Addition
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

5.1 TITLE Change Addition
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

6.1 TITLE Change Addition
 6.2 NAME
 6.3 STREET ADDRESS
 6.4 CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED Jeffrey B. Levy, President

4/26/99

954 522-1060

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)