

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 15, 2000 8:00 am
Secretary of State

08-15-2000 90019 026 ***150.00

DOCUMENT # P98000043471

1. Entity Name
INTERACTIVE SYSTEMS, INC.



Principal Place of Business Mailing Address
440 ANGELO LANE **440 ANGELO LANE**
COCOA BEACH FL 32931 **COCOA BEACH FL 32931**

A0072785



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

4. FEI Number **59-3522304** Applied For
 Not Applicable

Zip Country Zip Country 5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GALANOPOULOS, ATHANASSIOS
440 ANGELO LANE
COCOA BEACH FL 32931

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. **FILE NOW!!! FEE IS \$550.00**
After SEPTEMBER 13, 2000 Min. will be \$750.00.
Make Check Payable to Department of State 10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GALANOPOULOS, ATHANASSIOS 440 ANGELO LANE COCOA BEACH FL 32931 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *S Galanopoulos* **SIGNATURE REQUIRED** **8/7/2000** **(321)853-2411**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/00)

ISI

Do not remove Attachment # 081500

440 Angelo Lane
Cocoa Beach
FL 32931

2 of 2

DOC#
P# 180000043471
#0012185

Interactive Systems, inc.

July 11, 2000

To whom it my concern

Please note that this Corporation did not receive the first notice of the year 2000 Uniform Business Report.

I have enclosed a personal check for the amount of \$150.00.

I feel that my Corporation does not have to pay the additional amount stated in your letter, "2000 Uniform Business Report Second Notice", which was received 9 July 2000.

Thank you for the cooperation and attention.

Sincerely,



Theo Galanopoulos

Owner, ISI.

