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

PROFIT **CORPORATION** ANNUAL REPORT

1998

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 30 1998 8:00am Secretary of State

DOCUMENT # 63126 WEB DEVELOPMENT, INC.	1 (5)			RIPII BIBII DHAH BIDU BIBII 1861
Principal Place of Business	Mailing Address		T CORRECT DIRECTION TO THE PROPERTY OF THE PRO	DIBUT BIBIT BIBIT BIBIT BIBIT 1001
FLANAGAN & BAKER. P.A., CPA'S 2831 RINGLING BLVD.	Flanagan & Baker. P.A CPA'S 2831 RINGLING BOULEVARD		DO NOT WRITE IN TH	, JIE EDACE:
SARASOTA FL 34237-5349 US	SARASOTA FL 34237-5349	9	3. Date Incorporated or Qualified	NO SPACE
03			07/30/1979	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		59-2037097	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	, , , , , , , , , , , , , , , , , , , ,	6. Certificate of Status Desired	\$8.75 Additional
City & State	City & State			Fee Required
23	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Zip	Country	8. This corporation owes or has paid the	
24 25	29	30	Personal Property Tax due June 30.	Yes No
9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Register	ed Agent
TRAWICK & GRIFFIS, P.A.		81 Name		
2051 MAIN STREET		82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
SARASOTA FL 33577		63		
		83		
		84 City		85 Zip Code
11. Pursuant to the provisions of Sections 607.05 office or registered agent, or both, in the Stat agent. I am familiar with, and accept the oblig SIGNATURE	s. White	es, the above-named corporate the corporate statutes. Replaced Agent signature requires	Mara	e of changing its registered appointment as registered
Signature, typed or printed name of registered at 12. OFFICERS AN	ND DIRECTORS (NOTE	13.	ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTORS IN 12
TITLE PTD	DELETE	1.1 TITLE	ADDITIONO/OFFINIOES TO OFFIDERS	Change Addition
NAME WEBER, JOHN		1.2 NAME		
STREET ADDRESS 90 WOOLWICH ST.		1.3 STREET ADDRESS		
CITY-ST-ZIP BRESLAU ONT., CANADA		1.4 CITY - ST - ZIP		
TITLE	☐ DELETE	2.1 TITLE		Change Addition
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP	DELETE	2 4 CHY-ST-ZIP 3.1 TITLE		Change Addition
TITLE		3.1 THLE 3.2 NAME		C cuentia C ventrion
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY-ST-ZIP		
TITLE	☐ DELETE	4.1 TITLE		Change Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-SI-ZIP		4.4 CITY-ST-ZIP		
TITLE	☐ DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
NAME	L) DECEN	6.2 NAME		C Analida C Moternii
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		
14. I hereby certify that the information supplied a indicated on this annual report or supplement	with this filing does not qualify fo		Section 119.07(3)(i), Florida Statutes. I furthe	r certify that the information
Indicated on this annual report or supplement officer or director of the corporation or the rec Block 12 or Block 13 if changed, or on an attr	ceiver or trustee empowere <u>d to e</u>	urate and that my signatu execute this report as requ	uired by Chapter 607, Florida Statutes; and th	under oath; that I am an eat my name appears in