

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jul 31, 2003 8:00 am**  
**Secretary of State**

07-31-2003 90072 015 \*\*\*158.75

**DOCUMENT # F02000002098**

**1. Entity Name**  
**INTERNET STRATEGIC MARKETING, INC.**



**Principal Place of Business**  
**6666 N.W. 127TH TERRACE**  
**PARKLAND FL 33076**

**Mailing Address**  
**6666 N.W. 127TH TERRACE**  
**PARKLAND FL 33076**

**2. Principal Place of Business**

**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

**4. FEI Number** **36-4040343**

☐ Applied For  
☐ Not Applicable

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

☐ CHECK HERE IF MAKING CHANGES

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**AVENAIM, MAURICE**  
**6666 N.W. 127TH TERRACE**  
**PARKLAND FL 33076**

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. I am familiar with, and accept the obligations of registered agent.**

**SIGNATURE**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**Make Check Payable to Florida Department of State**

**9. Election Campaign Financing** ☐ **\$5.00 May Be Added to Fees**  
Trust Fund Contribution.

**10. OFFICERS AND DIRECTORS**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

**TITLE** **PD** ☐ Delete  
**NAME** **AVENAIM, MAURICE**  
**STREET ADDRESS** **6666 N.W. 127TH TERRACE**  
**CITY-ST-ZIP** **PARKLAND FL 33076**

**TITLE** ☐ Change ☐ Addition  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** ☐ Delete  
**NAME**  
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**CITY-ST-ZIP**

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**12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.**

**SIGNATURE:**

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/03)

6666 NW 127<sup>TH</sup> Terrace Parkland, Florida 33076  
TEL: 954-227-2860 FAX: 954-227-1682

July 29, 2003

Florida Secretary of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

To Whom It May Concern:

Please note that our company filed as a foreign profit corporation (FEI # 364040343) on April 22, 2002 and we have never received notice for filing our Uniform Business Report until days ago when we received your 60-day notice.

We have enclosed a check for \$158.75 for the filing of our UBR and a certificate of status and kindly ask that you make note so that we may receive appropriate notice for future filings, to avoid any mishaps.

Thank you in advance for your assistance in this matter and please feel free to contact me at anytime.

Sincerely,

**Maurice Avenaim**  
President