Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90080 029 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F98000005644

1. Corporation Name

RELIANT INTERACTIVE MEDIA CORP.

Principal Place of Business	Mailing Address						
13535 FEATHER SOUND DR. STE 220 CLEARWATER FL 33762	13535 FEATHER SOUND DR., ST CLEARWATER FL 33762	13535 FEATHER SOUND DR STE 220 CLEARWATER FL 33762		DO NOT WRITE IN THIS SPACE			
				<ol> <li>Date Incorporated or Qualifed 10/09/1998</li> </ol>			
2. Principal Place of Business	2a. Mailing Address			4. FEI Number		Applied For	
21	26			87-04119 <u>41</u>		Not Applicable	
Suite, Apt. #, etc.  2				5. Certifcate of Status Desired	·	.75 Additional ee Required	
		<del></del>		6. Election Campaign Financing		.00 May Be	
23				Trust Fund Contribution	Ac	ded to Fees	
Zip Country <b>25</b>	Zip 30	Country	4	This corporation owes the current year     Personal Property Tax.	r Intangible Yes		
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent				
HARRINGTON, TIM		81	Name				
13535 FEATHER SOUND DR., STE 220		82	Street Add	et Address (P.O. Box Number is Not Acceptable)			
CLEARWATER FL 33762		83	1				
	,	84	City		FL 85	Zip Code	
agent. I am familiar with, and accept the	State of Florida. Such change was author	ized by	the corporat	poration submits this statement for the purposition's board of directors. I hereby accept the ap	e of changi ppointment	ng its registered as registered	
SIGNATURE Signature, typed or printed name of registers	a ent and title if applicable. (NOTE: Regis	tered Age	ent signature requir	red when reinstating) DATE	<u> </u>	<del></del>	
organizato, typed or printed frame or rogisty	(11111111111111111111111111111111111111		<u> </u>	······································			

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICER AND DIRECTORS 13. 12. ☐ Change ☐ Addition DELETE 1.1 TITLE TITLE HARRINGTON, TIM 1.2 NAME NAME 13535 FEATHER SOUND DR., STE 220 1.3 STREET ADDRESS STREET ADDRESS **CLEARWATER FL** 1.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 2.1 TITLE TITLE HARRINGTON, KEVIN 2.2 NAME NAME 13535 FEATHER SOUND DR., STE 220 2.3 STREET ADDRESS STREET ADDRESS **CLEARWATER FL** 2.4 CITY-ST-ZIP CITY-ST-ZIP Change ---- Addition DELETE 31 TITLE TITLE ARTHUR MEZ 13535 FEATHER SOULD DR., SUITE 220 WILLIAMS, ROBERT 3.2 NAME NAME 13535 FEATHER SOUND DR., STE 220 3.3 STREET ADDRESS STREET ADDRESS **CLEARWATER FL** CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE TITLE RODLIGUEZ, KARL 34700 PACIFIC COMIT HIGHWAY, SUIR 303 SHAPIRO, LEWIS 4.2 NAME NAME 13535 FEATHER SOUND DR., STE 220 4.3 STREET ADDRESS STREET ADDRESS CAPISMAND BEACH, **CLEARWATER FL** 4.4 CITY-SY-ZIP CITY-ST-ZIP DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition □ DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 City-St-ZiP

14. I hereby certify that the information supplied with this filing indicated on this annual report or supplemental annual report file of the corporation or the receiver or trust Block 12 or Block 13 if changed, or on an attachment with toes not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information t is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an improvered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in ss, with all other like empowered.

SIGNATURE:

СЛY-ST-ZIP

SIGNAT

CR2E034 (11/98)