## 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 # F98000005718

1. Corporation Name

PEOPLE3, INC.

Principal Place of Business	Mailing Address
VANTAGE COURT NORTH, 200 COTTONTAIL LN	VANTAGE COURT NORTH, 20

## **FILED** Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90234 043 \*\*\*150.00



Principal Place of Business Mailing Address								
VANTAGE COURT NORTH. 200 COTTONTAIL LN VANTAGE COURT NORTH. 200 COTT		OTTON	TAIL LN					
SOMERSET NJ	06873	SOMERSET NJ O	3873			DO NOT WRITE IN T	HIS SPACE	
						3. Date Incorporated or Qualifed		
ļ						10/13/1998		ļ
2 Principal Di	ace of Business	2a. Mailing Addr	PSS			4. FEI Number	ΙAD	plied For
<u> </u>	ace of Business					22-3609913		t Applicable
21   26     Suite, Apt. #, etc.   Suite			uite, Apt. #, etc.				\$8.75	
			, 0.0.			5. Certifcate of Status Desired	Fee Re	I
22     27       City & State			City & State			6. Election Campaign Financing - \$5.00 May Be		
23		28	¬ .		Trust Fund Contribution Added to Fees			
Zip				This corporation owes the current year Intangible				
	25	29				Personal Property Tax.		
24	9. Name and Address of Curren			$\neg \neg$		10. Name and Address of New Register	ed Agent	
	J. Haille und Fladrood St Garter	it itugioto en signit		81	Name			
CTO	CORPORATION SYSTEM							
1200	SOUTH PINE ISLAND ROAD			82	Street A	ddress (P.O. Box Number is Not Acceptable)		1
PLAN	ITATION FL 33324			83				
1				84	City	State of the state	85 Zip (	Code
							of changing its	registered
office or re	postpred agent or both in the State.	of Florida. Such chan	de was authoriz	ed by	tne corbor	orporation submits this statement for the purpose ation's board of directors. I'hereby accept the ap	pointment as re	gistered :
agent. I ar	m familiar with, and accept the obliga	tions of, Section 607.	0505, Florida St	atutes				
SIGNATURE								\
	Signature, typed or printed name of registered ager				t signature req	uired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS		DS IN 12
12.		ID DIRECTORS		3.	<del></del>	ADDITIONS/CHANGES TO OFFICERS	Change	Addition
TITLE	PCD			TITLE			_ Gridings	
NAME	PITTENGER, LINDA			NAME				
STREET ADDRESS	200 COTTONTAIL LANE		1.3	STREET	ADDRESS			-
CITY-ST-ZIP	SOMERSET NJ			CITY-S	r-ZIP		☐ Change	Addition
TITLE	S	□D	ELETE 2.1	TITLE			Change	, [] Addition
NAME	LAVALETTE, GUY R		2.2	NAME	1			1
STREET ADDRESS	200 COTTONTAIL LANE		2.3	STREET	ADDRESS			. [
CITY-ST-ZIP	SOMERSET NJ			4 CITY-S	T- ZIP			
TITLE	T		ELETE 3.1	1 TITLE :	į.	·	Cpando	Addition
NAME	BERRY, DIANE		3.2	2 NAME				
STREET ADDRESS	200 COTTONTAIL LANE		3.3	STREET	ADDRESS			,
CITY-ST-ZIP	SOMERSET NJ	_	3.4	4. CITY-S	T-ZIP			
TITLE	D		ELETE 4.1	TITLE			☐ Change	☐ Addition
NAME	SANDERSON, PHIL		4 .	2 NAME				1
STREET ADDRESS	750 BATTERY STREET, 7TH FI	_	4.3	STREET	ADDRESS			
CITY-ST-ZIP	SAN FRANCISCO CA		4.4	CITY-S	r-ZIP			
TITLE	D			1 TITLE		- Art of the state	☐ Change	☐ Addition
NAME'	ESKENAZI, STEVE			2 NAME				
STREET ADDRESS	750 BATTERY STREET, 7TH FI		5.3	3 STREET	ADDRESS			
]	SAN FRANCISCO CA	•		4 CITY-S				
CITY-ST-ZIP TITLE	UNIT I FINITOROU UN			1 TITLE	- +		☐ Change	☐ Addition
		ن ن		2 NAME			_ 3-	_
NAME					ADDRESS			
STREET ADDRESS					1			
CITY-ST-ZIP			6.4	CITY-S	I-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: