

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000068606

1. Entity Name

INTERNET LAYAWAY, INC.

Principal Place of Business

2000 PGA BLVD SUITE 4410
N PALM BEACH FL 33408

Mailing Address

2000 PGA BLVD SUITE 4410
N PALM BEACH FL 33408

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-1035381

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HACKNEY, ROBERT C
2000 PGA BLVD SUITE 4410
N PALM BEACH FL 33408

7. Name and Address of New Registered Agent

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
LAMPE, KAREN
2000 PGA BLVD SUITE 4410
N PALM BEACH FL 33408 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
BUDD, STEPHEN
2000 PGA BLVD SUITE 4410
N PALM BEACH FL 33408 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
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CITY - ST - ZIP
☐ Delete

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CITY - ST - ZIP
☐ Delete

TITLE
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STREET ADDRESS
CITY - ST - ZIP
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE
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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ 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:

Signature and typed or printed name of signing officer or director

Date

Daytime Phone #

4/30/01 561-7758002

5. **FILED**
Sep 05, 2001 8:00 am
Secretary of State

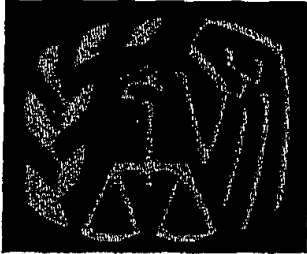
05-16-2001 90194 001 ***150.00



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)

Attachment



Internal Revenue Service

Accounts Management Division I

Branch II - Teletin Unit

Stop 751

PO Box 47421

Chamblee, GA 30362

Phone 678-530-7234/7235

FAX 678-530-6156

#HP0000006868

Date: June 25, 2001

EMPLOYEE IDENTIFICATION:0726127592

TO:	KAREN LAMPE	FAX:	561-625-4685
FROM:	Accounts Management Division I Teletin Unit	Pages:	1
Company Name	INTERNET LAYAWAY INC	Employer ID #	65-1035381
Company Name		Employer ID #	
Company Name		Employer ID #	
Company Name		Employer ID #	
Company Name		Employer ID #	
Company Name		Employer ID #	
Company Name		Employer ID #	

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