

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000078103

1. Entity Name

INTERNET STOCK MARKET.COM, INC

FILED

May 23, 2001 8:00 am
Secretary of State

05-23-2001 90200 037 ***150.00

Principal Place of Business

Mailing Address

1440 CORAL RIDGE DR
#358
CORAL SPRINGS, FL
33071

SAME

00057014

2. Principal Place of Business

1440 CORAL RIDGE DR

3. Mailing Address

1440 CORAL RIDGE DR

Suite, Apt. #, etc.

#358

Suite, Apt. #, etc.

#358

City & State

CORAL SPRINGS, FL

City & State

CORAL SPRINGS

Zip

33071

Country

USA

Zip

33071

Country

USA

4. FEI Number

59-3678269

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

DANIEL J. BARCY

Street Address (P.O. Box Number is Not Acceptable)

12253 Glenmore Dr.

City

Coral Springs

FL

Zip Code

33071

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

5-8-01

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: DIRECTOR
NAME: BOB MORRIS
STREET ADDRESS: 405 CENTRAL AVE - LOBBY
CITY-ST-ZIP: ST. PETERSBURG, FL 33701



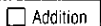
TITLE: PRESIDENT
NAME: DANIEL J. BARCY
STREET ADDRESS: 12253 Glenmore Dr.
CITY-ST-ZIP: Coral Springs, FL 33071



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



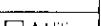
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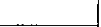
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true 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

5-8-01

Date

954-346-5562

Daytime Phone #

CR2E034 (11/00)