

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000091623

FILED  
Jan 10, 2005  
Secretary of State

**Entity Name:** INTERACTIVE PUBLISHING OF BOCA, INC.

**Current Principal Place of Business:**

7639 CEDARWOOD CIRCLE  
BOCA RATON, FL 33434 US

**New Principal Place of Business:**

**Current Mailing Address:**

7639 CEDARWOOD CIRCLE  
BOCA RATON, FL 33434 US

**New Mailing Address:**

**FEI Number:** 65-1140016

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WALSER, THOMAS C  
7015 BERACASA WAY, STE 201  
BOCA RATON, FL 33433 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** D ( ) Delete  
**Name:** MILT, VICTOR  
**Address:** 7639 CEDARWOOD CIRCLE  
**City-St-Zip:** BOCA RATON, FL 33434

**Title:** TREA ( ) Delete  
**Name:** MILT, KIM  
**Address:** 7639 CEDARWOOD CIRCLE  
**City-St-Zip:** BOCA RATON, FL 33434

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** D (X) Change ( ) Addition  
**Name:** MILT, KIM  
**Address:** 7639 CEDARWOOD CIRCLE  
**City-St-Zip:** BOCA RATON, FL 33434

**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** KIM MILT

D

01/10/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date