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06-26-2006 90003 034 ***150.00

P04000065710

06 JUL 19 10:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P04000065710			
1. Entity Name INET 2020, INC			
Principal Place of Business 14100 US HWY 19 N 121 CLEARWATER, FL 33764		Mailing Address 14100 US HWY 19 N 121 CLEARWATER, FL 33764	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FBI Number 20-1090122		Applied For ☐ Not Applicable	
5. Certificate of State Desired ☐		\$8.75 Additional Fee Required	
5. Name and Address of Current Registered Agent TAYLOR, DEBORAH E 14100 US HWY 19 N 121 CLEARWATER, FL 33764		7. Name and Address of New Registered Agent	
Name		Name	
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable)	
City		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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ Signature, typed or printed name of registered agent and file if applicable			
9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CARPENTER, BOBBY T 14100 US HWY 19 N SUITE 121 CLEARWATER, FL 33764	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V TAYLOR, DEBORAH E 14100 US HWY 19 N SUITE 121 CLEARWATER, FL 33764	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information is true and correct to the best of my knowledge and belief, and that I am an officer or director of the corporation.			
SIGNATURE: <i>Deborah Taylor</i>		6/22/2006 201532-0266	

**Division of Corporations****Annual Report****Annual Report Help**

Document Number

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Business Entity Name

I NET 2020, INC

☒ **After May 1st of each year, a late charge of \$400.00 is imposed, except in circumstances in which the entity did not receive prior notice. Please check this box if filing after May 1st and notice was not received.**

FEI Number

201090122

FEI Number Status

Listed Above

Applied For

Not Applicable

Certificate of Status Desired

Yes

No

\$8.75 each

Election Campaign Financing Trust Fund Contribution

Yes

No

Principal Place of Business

Address

14100 US HWY 19 N

Suite, Apt. #, etc.

121

City, State

CLEARWATER

, FL

Zip Code & Country **33764****Mailing Address**

Address

14100 US HWY 19 N

Suite, Apt. #, etc.

121

City, State

CLEARWATER

, FL

Zip Code & Country **33764****Name and Address of Registered Agent**

Name (Last, First, Middle, Title)

TAYLOR, **DEBORAH**

, E

- OR -

Business to serve as RA

Address (PO Box is not acceptable) **14100 US HWY 19 N**

Suite, Apt. #, etc.

121

City, State

CLEARWATER

, FL

Zip Code & Country