FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P93000069963 (5) DOCUMENT #

INTERNET EXCELLENCE INC.

FILED Apr 23 1998 8:00am Secretary of State



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Principal Place of Business Mailing Address						- E ESCONDON EIR ADIRO EISIA COLIT OCITI OC	IN BEIDE BHID	IBRKE IBRKE DI	400 HHI 1081	
B22 SE 9TH STREET DEERFIELD BEACH FL 33441		P.O. BOX 780637 SAN ANTOMO TX 7827 US	SAN ANTONIO TX 78278			DO NOT WRITE	: IN TUIC C	מאסר		
US						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified				
						10/04/1993				
2. Principal P	2a. Mailing Address	ing Address			4. FEI Number		I Ai	pplied For		
21 26						74-2684057		N(ot Applicable	
Sulte, Apt.		Suite, Apt. #, etc.	27			5. Certificate of Status Desired		+	Additional equired	
City & State	Э	City & State	City & State			6. Election Campaign Financing		\$5.00	May Be	
23	28					Trust Fund Contribution			to Fees	
Zip	Country	Zip	\vdash	ıntry		8. This corporation owes or has pa				
24	4 25 29 30 30 9. Name and Address of Current Registered Agent					Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent				
77 11	JEL JEAN		81	Name	10. Name and Address of New He	gistered A	gent			
822 SE 9TH STREET					Name					
DEERRIELD BEACH FL 33441				82	Street Addre	Address (P.O. Box Number is Not Acceptable)				
DELINICED DENOTITE 33441				63						
				84	City		FL	85 Zip (Code	
11. Pursuant t	o the provisions of Sections 607.050.	2 and 607 1508. Florida Statu	tes the a	hove	-named corno	pration submite this statement for the r	CL ASSOCIATION		te registered	
office or re agent. I as	egistered agent, or both, in the State in familiar with, and accept the obligations.	of Florida Such change was ations of, Section 607,0505, F	authorize lorida Stat	d by	the corporation	oration submits this statement for the pon's board of directors. I hereby accept	ot the appo	intment as	registered	
SIGNATURE										
12.	Signature, typed or printed name of registered age			d Age	nt signature required	•	DATE			
TITLE	OFFICERS AND DIRECTORS 13. DELETE 1.11		TI C	— т	ADDITIONS/CHANGES TO OFFIC					
NAME	ANDEDOOM DODDY			1.1 TITLE 1.2 NAME			ı	Change	☐ Addition	
STREET ADDRESS	PO DRAWER 699 N/A			1.3 STREET ADDRESS						
CITY-ST-ZIP	ANGEL FIDE NM 97710			1.4 CITY-ST-ZIP						
TITLE	(34)		2.1 TI		1- ZIP			Change	Addition	
NAME	FRANCESCO, JAMES			2.2 NAME						
STREET ADDRESS	11107 WURZBACH, SUITE 30	6		2.3 STREET ADDRESS		1 P	• ,			
CITY-ST-ZIP	8AN ANTONIO TX 78230-2446	6	2. 4 C						ł	
TITLE	☐ DELETE			TLE		7	T	Change	Addition	
NAME			3.2 NA	ME			•	•	_	
STREET ADDRESS			3.3 S1	REET	ADDRESS					
CITY-ST-ZIP			3.4. C	ITY-S	T- 71P				ľ	
TALE		☐ DELETE	4.1 70	ſ L €			[Change	Addition	
NAME			4.2 N	AME	- 1					
STREET ADORESS			4.3 ST	REET	ADDRESS					
CITY-ST-ZIP			4.4 CI	TY-ST	- ZIP					
TITLE		☐ DELETE	5.1 TI	ſLE				Change	Addition	
NAME			52 NA	ME						
STREET ADORESS			5.3 ST	REET #	ADDRESS				ļ	
CITY-ST-ZIP			5.4 CI		- ZIP					
TITLE		☐ DEŁETE	6.1 111					Change	Addition	
NAME			6.2 NA	ME						
STREET ADDRESS			6.3 ST	REET A	ADDRESS					
CITY-ST-ZIP	artify that the information supplied wit	the Abia of Character and a second	6.4 CI			0000 110 07/0V() Fireful Circums I		 		

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.

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