

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P94000086028 (5)

1. Corporation Name

INTERNETWORK PUBLISHING CORPORATION



Principal Place of Business

17730 SCARSDALE WAY  
BOCA RATON FL 33496

Mailing Address

17730 SCARSDALE WAY  
BOCA RATON FL 33496

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

Zip

Country

30

9. Name and Address of Current Registered Agent

BREGMAN, HOWARD A  
777 SO. FLAGLER DRIVE STE. 310 EAST  
WEST PALM BEACH FL 33401

3. Date Incorporated or Qualified

11/23/1994

3a. Date of Last Report

03/13/1995

4. FEI Number

65-0543622

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☒ Yes ☐ No

10. Name and Address of New Registered Agent

81. Name

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

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of Registered Agent

DATE

12. OFFICERS AND DIRECTORS

|                |                     |                                 |
|----------------|---------------------|---------------------------------|
| TITLE          | D                   | <input type="checkbox"/> DELETE |
| NAME           | MARBACH, CARL B     |                                 |
| STREET ADDRESS | 17730 SCARSDALE WAY |                                 |
| CITY-STATE-ZIP | BOCA RATON FL 33496 |                                 |
| TITLE          | D                   | <input type="checkbox"/> DELETE |
| NAME           | MARBACH, WILLIAM H  |                                 |
| STREET ADDRESS | 17730 SCARSDALE WAY |                                 |
| CITY-STATE-ZIP | BOCA RATON FL 33496 |                                 |
| TITLE          | D                   | <input type="checkbox"/> DELETE |
| NAME           | SILVER, EDWARD D    |                                 |
| STREET ADDRESS | 17730 SCARSDALE WAY |                                 |
| CITY-STATE-ZIP | BOCA RATON FL 33496 |                                 |
| TITLE          |                     | <input type="checkbox"/> DELETE |
| NAME           |                     |                                 |
| STREET ADDRESS |                     |                                 |
| CITY-STATE-ZIP |                     |                                 |
| TITLE          |                     | <input type="checkbox"/> DELETE |
| NAME           |                     |                                 |
| STREET ADDRESS |                     |                                 |
| CITY-STATE-ZIP |                     |                                 |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

|                    |                                                                   |
|--------------------|-------------------------------------------------------------------|
| 1. TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2. NAME            |                                                                   |
| 3. STREET ADDRESS  |                                                                   |
| 4. CITY-STATE-ZIP  |                                                                   |
| 5. TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 6. NAME            |                                                                   |
| 7. STREET ADDRESS  |                                                                   |
| 8. CITY-STATE-ZIP  |                                                                   |
| 9. TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 10. NAME           |                                                                   |
| 11. STREET ADDRESS |                                                                   |
| 12. CITY-STATE-ZIP |                                                                   |
| 13. TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 14. NAME           |                                                                   |
| 15. STREET ADDRESS |                                                                   |
| 16. CITY-STATE-ZIP |                                                                   |

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-11-96

407 984 9330

CR2E034 (12/95)