2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jun 19, 2007
Secretary of State

DOCUMENT# P94000086028

Entity Name: INTERNETWORK PUBLISHING CORPORATION

Current Principal Place of Business:

5455 N. FEDERAL HWY
SUITE 0
BOCA RATON, FL 33487 US

New Principal Place of Business:

500 W. MADISON, #1000
CHICAGO, IL 60661 US

Current Mailing Address:

C/O TRAVELPORT
400 INTERPACE PARKWAY, BLDG A
PARSIPPANY, NJ 07054

New Mailing Address:

FEI Number: 65-0543622 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

OFFICERS AND DIRECTORS:

Title: CD ( ) Delete
Name: CLARKE, JEFF
Address: 400 INTERPACE PARKWAY, BLDG A
City-St-Zip: PARSIPPANY, NJ 07054

Title: VP ( ) Delete
Name: HENNINGSEN, GARY
Address: 400 INTERPACE PARKWAY, BLDG A
City-St-Zip: PARSIPPANY, NJ 07054

Title: T ( ) Delete
Name: MONACO, KEVIN
Address: 400 INTERPACE PARKWAY, BLDG A
City-St-Zip: PARSIPPANY, NJ 07054

Title: DEVP ( ) Delete
Name: BOCK, ERIC J
Address: 400 INTERPACE PARKWAY, BLDG A
City-St-Zip: PARSIPPANY, NJ 07054

Title: VAS ( ) Delete
Name: BOAS, ROCHELLE
Address: 400 INTERPACE PARKWAY, BLDG A
City-St-Zip: PARSIPPANY, NJ 07054

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: GARY HENNINGSEN VP 06/19/2007

Electronic Signature of Signing Officer or Director Date