2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000068340

FILED
Mar 29, 2000 8:00 am
Secretary of State
03-29-2000 90077 003 ***150.00

DO NOT WRITE IN THIS SPACE

1. Entity Name
WEB SOLVERS, INC.

Principal Place of Business	Mailing Address
1350 ORANGE AVE STE 233 WINTER PARK FL 32789 US	1350 ORANGE AVE STE 233 WINTER PARK FL 32789-4955 US

2. Principal Place of Business	3. Mailing Address
1350 ORANGE AVE	1350 ORANGE AVE
Suite, Apt. #, etc.: SUITE 101	Suite, Apt. #, etc.: SUITE 101
City & State: WINTER PARK, FL	City & State: WINTER PARK, FL
Zip: 32789 Country: US	Zip: 32789 Country: US

4. FEI Number 59-3340646 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CERTO, MATTHEW W
545 BIRD SONG CT.
LONGWOOD FL 32779

7. Name and Address of New Registered Agent

Name: CERTO, MATTHEW W.
Street Address (P.O. Box Number is Not Acceptable): 645 HUNTINGTON AVE.
City: WINTER PARK FL Zip Code: 32789

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.

SIGNATURE ______________________________ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☑

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CERTO, MATTHEW W 645 HUNTINGTON AVE WINTER PARK FL 32789 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CHAIRMAN CERTO, SAMUEL 545 BIRDSONG CT. LONGWOOD, FL 32779 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (9/99)

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: MATTHEW W CERTO 2/22/2000 407-599-7515
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #