

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

FILED
May 14 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P95000076022 (9)

1. Corporation Name
EXPRESSWEB, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business
19501 NORTHEAST 10 AVENUE, SUITE 203
NORTH MIAMI BEACH FL 33179

Mailing Address
19501 NORTHEAST 10 AVENUE, SUITE 203
NORTH MIAMI BEACH FL 33179

3. Date Incorporated or Qualified

10/03/1995

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

Applied For
Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

65-0612209

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

22 City & State

27 City & State

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

23 Zip

Country

28 Zip

Country

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD
343 ALMERIA AVENUE
CORAL GABLES FL 33134

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, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME STOPNICK, MICHAEL J
STREET ADDRESS 19501 NORTHEAST 10 AVENUE, SUITE 203
CITY-ST-ZIP NORTH MIAMI BEACH FL 33179 ☒ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE VP
NAME KRARUP, JENS
STREET ADDRESS 19501 NORTHEAST 10 AVENUE, SUITE 203
CITY-ST-ZIP NORTH MIAMI BEACH FL ☐ DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ~~VP~~
NAME CARANI, SHERRY L
STREET ADDRESS 19501 NORTHEAST 10 AVENUE, SUITE 203
CITY-ST-ZIP NORTH MIAMI BEACH FL 33179 ☐ DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

President ☒ Change ☐ Addition

TITLE VP
NAME JEROLD HART
STREET ADDRESS 19501 NE 10 AVENUE SUITE 203
CITY-ST-ZIP NORTH MIAMI BEACH FL ☐ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE S
NAME SHERRY HART
STREET ADDRESS 19501 NE 10 AVENUE, SUITE 203
CITY-ST-ZIP NORTH MIAMI BEACH FL ☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME IRA POSNER
STREET ADDRESS 19501 NE 10 TH AVE Suite 203
CITY-ST-ZIP North Miami Beach FL 33162 ☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☒ Addition

14. 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.

SIGNATURE: X

x 4/30/98 305-654-9070

CR2E034 (10/97)