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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000086241 (3)

DOT-SHOP CYBERMALL, INC.

FILED Apr 23 1998 8:00am Secretary of State

| Principal Pi | ace of Business | Mailing Add | ress | | | | OL COLOR DIVIDE (4001 D. | HBOL FAOL IEDA |
|---|---|--|---------------------------------------|---------------------|--------------------------------|--|-------------------------------------|---------------------------------------|
| | | | | | | | | |
| 1570 MADRUGA AVE 1570 MADRUGA AVE CORAL GABLES FL 33146 CORAL GABLES FL 33146 | | | | | | | | |
| | | | | | | DO NOT WRITE IN T | HIS SPACE | |
| | | | | | | 3. Date Incorporated or Qualified | _ | |
| | | | | | | 11/09/1995 | | |
| 2. Principa | Place of Business | 2a. Mailing A | Address | | | 4. FEI Number | A | pplied For |
| 21 | · · · · · · · · · · · · · · · · · · · | 26 | | | | 65-0627801 | N | ot Applicable |
| Sulte, Ap | ot. #, etc. | Suite, Ap | it. #, etc. | | | 5. Certificate of Status Desired | - | Additional |
| 22 | | 27 | | | - •• | | Fee R | tequired |
| City & St | late | City & St | ate | | | 6. Election Campaign Financing | | May Be |
| 23 Zip | | 28 | | | | Trust Fund Contribution | | to Fees |
| | Country | ' | | Country | | 8. This corporation owes or has paid the | | |
| 24 | 25 29 29 29 29 29 29 29 | | 30 | 30 | | Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent | | |
| | | is of Current negistered Age | · · · · · · · · · · · · · · · · · · · | 81 | Name | 10. Name and Address of New Registe | rea Agent | |
| | GLUCKSTERN, STEVEN | | | 101 | Name | | | |
| | 7760 S W 145 ST. | | | 82 | Street Add | dress (P.O. Box Number is Not Acceptable) | | |
| ľ | MIAMI FL 33158 | | | | | · | | |
| | | | | 83 | | | | |
| | | | | 84 | City | | 85 Zip | Code |
| | | | | 1 | , | | FL 🎳 🖆 | 2000 |
| SIGNATURE | Signature, typed or printed name of | of registioned agent and title if applicable | ···· | | nt signature requ | ukod when reinstating) DA | | |
| 12. | OF OF | FICERS AND DIRECTORS | 1: | | | , ADDITIONS/CHANGES TO OFFICERS | | |
| TITLE | P CHICKOTEDM OT | - | | 1 TITLE | Ā | على الأسمور وصاوات م | ☐ Change | Addition |
| NAME | GLUCKSTERN, STE | EVEN F | 1.2 | 2 NAME | , iv | MATKHEW MANKINS 570 MADRUGA AVE | | |
| STREET ADDRES | I | | 1.3 | STREET | ADDRESS . | | // | |
| CITY-ST-ZIP | MIAMI FL 33146 | | | CITY-S | T-ZIP | LOBAL GABLES, FL. | 33146 | |
| TITLE | | L | DELETE 2.1 | TITLE | γ | lonarhan Hollander | ☐ Change | Addition |
| NAME | | | 22 | 2 NAME | | 570 MADRUGA PAVE. | | • |
| STREET ADDRESS | S | | . 23 | STREET | ADDRESS | CORAL BABLES, FL. 33 | | |
| CITY-ST-ZIP | <u> </u> | | | 4 CITY - S | ST-ZIP C | rokuc dueces 'Le. 24 | | |
| TITLE | | L | • | TITLE | | | L Change | Addition |
| NAME | | | | NAME | | | | |
| STREET ADDRESS | \$ | | 3.3 | STHEET | ADDRESS | | | |
| CITY-ST-ZIP | | ····· | 1 | L CITY-9 | ST-ZIP | | | · · · · · · · · · · · · · · · · · · · |
| TITLE | | L_ | i i | TITLE | | | L_ Change | Addition |
| NAME | | | 4 | 2 NAME | ļ | | | |
| STREET ADDRESS | \$ | | 4.3 | STREET | ADDRESS | | | |
| CITY-ST-ZIP | | | | CITY-S | T-ZIP | | | |
| TITLE | | | DELETE 5.1 | TITLE | | | Change | Addition |
| NAME | | | 5.2 | NAME | | | | |
| STREET ADDRESS | s | | 5.3 | STREET | ADDRESS | | | |
| CITY-ST-ZIP | | | 5.4 | CITY-S | T-21P | | | |
| TITLE | | | DELETE 6.1 | TITLE | | | Change | Addition |
| NAME | | | 6.2 | NAME | | | | |
| STREET ADDRESS | s | | 63 | STREET | AODRESS | | | |
| CITY-ST-ZIP | _ | | 6.4 | CITY-S | T- ZIP | | | |
| 14. hereby | y certify that the information | supplied with this filing does | not qualify for the e | xemo! | ion stated in | Section 119.07(3)(i), Florida Statutes. I furthe | er certify that the | information |
| officer o | or director of the corporation | supplemental annual report is t n or the receiver or austee em r on an altachment with an ad | powered to execut | and tha e this i | it my signati report as rec | ure shall have the same legal effect as if mad quired by Chapter 607, Florida Statutes; and t | e under oath; the nat my name ap | at I am an pears in |