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FILED
Apr 08 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 # P95000089027 (3)

1. Corporation Name
WEBCONNECT INC.

Principal Place of Business

% WORLDATA, INC.
5200 TOWN CENTER CIRCLE
BOCA RATON FL 33486

Mailing Address

% WORLDATA, INC.
5200 TOWN CENTER CIRCLE
BOCA RATON FL 33486



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address	
21 3000 N. MILITARY TRAIL	26 3000 N. MILITARY TRAIL		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
22	27		
City & State		City & State	
23 Boca Raton FL	28 Boca Raton FL		
Zip	Country	Zip	Country
24 33431	25 USA	29 33431	30 USA

3. Date Incorporated or Qualified	
11/20/1995	
4. FEI Number	Applied For
65-0637806	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 owes or has paid the current year Intangible Personal Property Tax due June 30.	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

LAWRENCE B. JURAN, P.A.
1200 CORPORATE CENTER WAY
SUITE 100
WELLINGTON FL 33414

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHWEDELSON, ROY	1.2 NAME	
STREET ADDRESS	% 5200 TOWN CENTER CIRCLE	1.3 STREET ADDRESS	3000 N. MILITARY TR.
CITY-ST-ZIP	BOCA RATON FL 33486	1.4 CITY-ST-ZIP	BOCA RATON, FL 33431
TITLE	D	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHWEDELSON, HELENE	2.2 NAME	
STREET ADDRESS	% 5200 TOWN CENTER CIRCLE	2.3 STREET ADDRESS	3000 N. MILITARY TR.
CITY-ST-ZIP	BOCA RATON FL 33486	2.4 CITY-ST-ZIP	BOCA RATON, FL 33431
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 on an attachment with my address.

SIGNATURE:

[Signature]

3/30/98 (561)393.8206

CR2E034 (10/97)