## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

## 1996

**DOCUMENT #** 

P95000092372 (8)

INTERNET MEETING POINT, INC.

INTENN	ET MECTING POINT, INC.					
Principal Place	of Business	Mailing Address		- CODYNEDI CIU CINEC ENHI DUCH ARTI	L BONK BOKER (BINE NINSE LUKU YOSHE NEDI 1801)	
673 JAMESTOWN BLVD APT. 1048 ALTAMONTE SPRINGS FL 32714		673 JAMESTOWN BLVD APT. 1048 ALTAMONTE SPRINGS FL 32714				
				3. Date Incorporated or Qualified 12/04/1995	3a. Date of Last Report	
2 Principal Pla 21 5 10 1	nce of Business Nocking bird Lane	2a. Mailing Address 26 510 Mockin	abind Lane	4. FEI Number	★ Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		<b>6</b> 0-47-14-4011-6-7	Not Applicable	
22		27		5. Certificate of Status Desired	Fee Required	
City & State 23 Altamo	onte Springs, FL	City & State Altamonte	<u></u>	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
24 3271	Country Seminole	<sub>Zip</sub> 29 327/4	Seminole	8. This corporation has liability to Florida Statutes X Ye	r intangible tax under s. 199.032, is: [] No	
T.11	9. Name and Address of Current	Registered Agent	30 000000	10. Name and Address of New	<del></del>	
			81 Name	Schneider, Elizabet		
	ER, ELIZABETH		82 Street	Address (P.O. Box Number is Not Accepta	able)	
673 JAMESTOWN BLVD., APT. 1048 ALTAMONTE SPRINGS FL 32714			510	510 Mockingbird Lane		
ALIAMUI	HIE OFMINGO FL 32/14		63	<del>-</del>		
TINNITE BETWEEN THE STREET	M		84 City A 14	amonte Springs	FL 85 Zip Code 327/4	
or registere	of the provisions of Sections 607.0502 and agent, or both, in the State of Florid	and 607,1508, Florida Statute Such change was authorize	s, the above-named co d by the corporation's	proporation submits this statement for the puboard of directors. I hereby accept the app	urpose of changing its registered office pointment as registered agent. I am	
TOTAL PARE	to distribute of the obligations of the decide	ri 007.0003, ribilda Statutes.				
SONATUR: S	Cyclet Schreider	critical applicable (NOT	<u>chneider – P</u> E Hagistered <b>Ag</b> ent signature r	resident c	2 - 9 - 96 DATE	
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12	
THEF	PD Schneider, Elizabeth	☐ DELETE	1. 1 TITLE	PD	Change Addition	
NAME STREET ADDRESS	673 JAMESTOWN BLVD., APT.	1040	1.2 NAME	Schneider, Elizabeth		
CITY-ST ZIP	ALTAMONTE SPRINGS FL 327		1.3 STREET ADDRESS	510 Mockingbird Lane Altamonte Springs F	C. 2274	
THUE	VT	DELETE	1.4 GITY- ST-ZIP 2.1 TITLE	VT	FL 32714  K1 Change   Addition	
NAM:	KOETTER, GERHARD		22 NAME	Koetter, Gerhard	M change Nation	
S'RÉLL' ADURESS	673 JAMESTOWN BLVD., APT.	1048	2 3 STREET ADDRESS	AM Flugplatz 4		
COTY STAZIF	ALTAMONTE SPRINGS FL 327	14	2 4 City - St - Zip	33659 Bielefold - Gi	ERMANY	
THUE	V	☐ DELETE	3 1 TITLE	V	Change Addition	
NAME	LAUTERJUNG, FRED		3 2 NAME	Lauterjung, Fred		
STHEET ADDRESS	673 JAMESTOWN BLVD., APT.		3.3 STREET ADDRESS	bretoniche Strasse 3		
CITY-ST-7/P	ALTAMONTE SPRINGS FL 327		3.4 CITY - ST - ZIP	33659 Bielefeld - GE	RMANY	
NAME		☐ DELETE	4 1 TITLE		Change Addition	
STREET ADDRESS			4 2 NAME			
CHY-ST ZIP			4.3 STREET ADDRESS 4.4 City - St - Zip			
TIFLE		☐ DELETE	5 1 TiTLE		☐ Change ☐ Addition	
NAME			5 2 NAME			
STREET ADDRESS			5 3 STREET ADORESS			
C TY-SI-ZP		/	5 4 CITY - ST - ZIP			
1 1(:		☐ DELETE	6 1 TITLE		Change Addition	
MAVE			6.2 NAME			
STREET ADDRESS			63 STREET ADDRESS			
14. I do hereby	cortify that the information supplied with	th this filing is valuatarily furnic	64 CHY-ST-ZiP	ify for the exemption stated in Section 119	07/2002 Florido Oscillo	
oath; that I		report or supplemental annu- tion or the receiver or trustee	al report is true and act empowered to execute	ny for the exemption stated in Section 119 curate and that my signature shall have the e this report as required by Chapter 607, Fi		

SIGNATURE: Elyabert Schneider 2-9-96 (407) 869 6391

SIGNATURE: Elyabert Schneider 2-9-96 (407) 869 6391

Distribution of Signature and Typed or Printed Name of Signing Officer or Director