

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000092372 (8)

1. Corporation Name

INTERNET MEETING POINT, INC.

Principal Place of Business

673 JAMESTOWN BLVD., APT. 1048
ALTAMONTE SPRINGS FL 32714

Mailing Address

673 JAMESTOWN BLVD., APT. 1048
ALTAMONTE SPRINGS FL 32714



3. Date Incorporated or Qualified

12/04/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 510 Mockingbird Lane

26 510 Mockingbird Lane

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Altamonte Springs, FL

28 Altamonte Springs, FL

24 Zip

25 Country

29 Zip

30 Country

32714

Seminole

32714

Seminole

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SCHNEIDER, ELIZABETH
673 JAMESTOWN BLVD., APT. 1048
ALTAMONTE SPRINGS FL 32714

81 Name Schneider, Elizabeth

82 Street Address (P.O. Box Number is Not Acceptable)

510 Mockingbird Lane

83

84 City

Altamonte Springs

FL

85 Zip Code
32714

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

Elizabeth Schneider

Elizabeth Schneider - President

2-9-96

Signature typed or printed name of registered agent as of time of application

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

NAME SCHNEIDER, ELIZABETH
STREET ADDRESS 673 JAMESTOWN BLVD., APT. 1048
CITY-STATE-ZIP ALTAMONTE SPRINGS FL 32714

TITLE VT ☐ DELETE

NAME KOETTER, GERHARD
STREET ADDRESS 673 JAMESTOWN BLVD., APT. 1048
CITY-STATE-ZIP ALTAMONTE SPRINGS FL 32714

TITLE V ☐ DELETE

NAME LAUTERJUNG, FRED
STREET ADDRESS 673 JAMESTOWN BLVD., APT. 1048
CITY-STATE-ZIP ALTAMONTE SPRINGS FL 32714

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

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SIGNATURE:

Elizabeth Schneider

Elizabeth Schneider

2-9-96

(407) 869-6391

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)