SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT # P9500009

OCUMENT # P9500094197 (7)
INTERNET SERVICES OF CENTRAL FLORIDA, INC.

Principal Place of Business

2. Principal Place of Business

801 WEST MORSE BLVD. SUITE 150

WINTER PARK FL \$2789

Mailing Address

861 WEST MORSE BLVD. SUITE 150

WINTER PARK FL 32789

2a. Mailing Address

26

FILED Jul 29 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

Applied For

Not Applicable

3. Date Incorporated or Qualified

90

12/12/1995

59-3349813

4. FEI Number

| Sulte, Apt. 17.5 | | Suite, Apt. #, etc. | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | | 75 Additional e Required | |
|---|---|------------------------------------|---------------------|---|---|---|---------------------------------------|-----------------------------|--|
| City & State | | City & State | | | | 6. Election Campaign Financing | | | |
| 23 | | 28 | ``T | | | 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees | | | |
| Zip | Country | Zip | Count | try | | 8. This corporation owes or has paid the current year Intangible | | | |
| 24 | 25 | | 30 | | | Personal Property Tax due June 30. Yes X No | | | |
| | 9. Name and Address of Current | Registered Agent | | | | 10. Name and Address of New R | egistered Agent | | |
| YOUNG, WALTER R JR | | | | Na Na | me | | | | |
| 861 WEST MORSE BLVD. | | | | | 82 Street Address (P.O. Box Number is Not Acceptable) | | | | |
| SUITE 150 | | | | | | | | | |
| WINTER PARK FL 32789 | | | | 83 | | | | | |
| | | | 8 | 4 City | у | | 85 | Zip Code | |
| 44 5 | | | L | | | | | | |
| 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 bitle of applicable (NOTE: Registered Agent signature required when reinstating) DATE | | | | | | | | | |
| 12. | | | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | | | | |
| TITLE | PD | DELETE | 1.1 TITLE | | | | Chan | | |
| NAME | YOUNG, WALTER R JR. | | | E | | | Chan | ge Addition | |
| STREET ADDRESS | 861 WEST MORSE BLVD. | | | 1.3 STREET ADDRESS | | | | | |
| CITY-ST-ZIP | WINTER PARK FL | | | 1.4 CITY-ST-ZIP | | | | | |
| TITLE | D DELETE | | | 2.1 TITLE | | | Chan | ge Addition | |
| NAME | STARAL, GERALD | | 2.2 NAMI | E | | | Onum | go [Albolion] | |
| STREET ADDRESS | 861 WEST MORSE BLVD. | | 2.3 STRE | ET ADDRE | SS | | | ļ | |
| CITY-ST-ZIP | WINTER PARK FL | | 2.4 CITY- | ST-ZIP | | | | ŀ | |
| TITLE | D DELETE | | | | | | Chan | ge Addition | |
| NAME | MÅRCHI, STEVEN | | 3.2 NAME | | | | | | |
| STREET ADDRESS | 861 WEST MORSE BLVD | | 3.3 STRE | ET ADDRE | 88 | | | | |
| CITY-ST-ZIP | WINTER PARK FL | | 3.4 CITY- | ST-ZIP | | | | | |
| TITLE | DELETE | | | | | | Chan | ge Addition | |
| NAME | | | 4.2 NAME | : | | | | | |
| STREET ADDRESS | | | 4.3 STRE | ET ADDRE | ss | | | 1 | |
| CITY-ST-ZIP | | | 4.4 CITY- | ST-ZIP | | | | | |
| TITLE | DELETE | | 5.1 TITLE | 5.1 TITLE | | | Chang | ge 🔲 Addition | |
| NAME | | | 5.2 NAME | | | | | ļ | |
| STREET ADDRESS | | | 5.3 STREE | ET ADDRE | SS | | | | |
| CITY-ST-ZIP | | | 5.4 CITY- | | | | | | |
| TITLE | | DELETE | 6.1 TITLE | | | | Chang | ge Addition | |
| NAME | | | 6.2 NAME | | | | | | |
| STREET ADDRESS | | | 63 STREI | ET ADDRE | SS | | | | |
| CITY-ST-ZIP | diff. that the information available it | is filling along and a self of the | 6.4 CITY- | ST-ZIP | 1 | - 440 07/0\0 El 11 01 11 | · · · · · · · · · · · · · · · · · · · | | |
| 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 any attachment with an address. | | | | | | | | | |