FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90180 042 ***158.75

DOCUMENT # P9600004840

1. Corporation Name

INTERNET COMMUNICATION NETWORK CORP.

FUSIVE. COM, CORP.

Principal Place	of Business	Mailing Address				
6420 CONGRES	S AVE., STE. 1850	6420 CONGRESS AVE., ST	E. 1850	ļ		
2000 2000				DO NOT MOITE IN		
BOCA RATON F	FL 33487	BOCA RATON FL 33487		DO NOT WRITE IN T	HIS SPACE	
US		US		3. Date Incorporated or Qualifed		
				01/12/1996		
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21 800 F	airway Doine.	26 800 Fairwa	u Dove	65-0639591	Not Applicable	
Suite, Apt.		Suite, Apt. #, etc.	T.	5. Certifcate of Status Desired	\$8.75 Additional	
22 Stre. 100)	27 Ste. 100		5. Certificate of Citatos Besired (23	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23 Deerf	seld Beach, FL	28 Deerfield Be	ach. Fi	Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes the current year	r Intangible	
24 3344	1 25 LLS A	29 33441	30 USA	Personal Property Tax.	⊠ Yes □ No	
 33 (9. Name and Address of Current			10. Name and Address of New Registe	red Agent	
81 Name Franchisch Parid						
				Finkelstein. David		
6420 CONGRESS AVE., STE. 1850				ddress (P.O. Box Number is Not Acceptable)		
2000						
ROCA RATON FL 33487						
2001111101112 00101					FL 85 Zip Code 33496	
<u></u>						
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statut Florida, Such change was a	es, the above-named o	corporation submits this statement for the purpos ration's board of directors. I hereby accept the a	a or changing its registered	
agent. ai	m familiar with, and accept the obligation	ons of, Section 607.0505, Flo	rida Statutes.			
SIGNATURE						
GIGHATORE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE	: Registered Agent signature re			
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS		
TITLE	DP	. DELETE	1.1 TITLE	DP	Change Addition	
NAME	FINKELSTEIN, DAVID		1.2 NAME	Finkelstein, David		
STREET ADDRESS	6420 CONGRESS AVE STE 2000)	1.3 STREET ADDRESS	800 Fairway Drive. Ste. 100		
CITY-ST-ZIP	BOCA RATON FL 33487		1,4 CITY-ST-ZIP	Deerfield Beach, FL 33441		
TITLE	DS	☐ DELETE	2.1 TITLE	DT	☐ Change ☐ Addition	
NAME	MAHOWALD, PAUL		2.2 NAME	Mahowald, Paul		
STREET ADORESS		n	2.3 STREET ADDRESS	200 Fairway Drive, Ste. 100		
	BOCA RATON FL 33487		2.4 CITY-ST-ZIP	Deerfield Beach, FL 33441	and the property of the	
CITY-ST-ZIP	DT	☐ DELETE		DS	Change Addition	
} ···-	_ - ·				- • –	
NAME	ALCALAY, BEN Z		J.Z NAME	ALCAIDY, BEN ZION 551 NW 77 th St., Ste. 206		
STREET ADDRESS	••••		3.3 STREET ADDRESS	221 VM 1147 21 1 2 1 1 2 2		
CITY-ST-ZIP	BOCA RATON FL 33487			Boca Ration, FL 33487	Change DAddis-	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition	
NAME	,		4, 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			

CITY-ST-ZIP 14. I hereby certify that the information simpled 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 changing to on the attachment with an address, with all other like empowered.

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:\/

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

TITLE

NAME

TITLE

DELETE

☐ DELETE

Change

Change

☐ Addition

Addition