PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600005049

1. Corporation Name

INTERNET COMMERCIAL ADVANTAGE, INC.

May 07, 1999 8:00 am Secretary of State

05-07-1999 90018 016 ***150.00



Principal Plac	e of Business	Mailing	Address					**** ***** *****	3416: 21111 42111 4	
65 66TH STREET NORTH 65 66TH STREET NORTH										
ST. PETERSBUI	RG FL 33710	ST. PET	ST. PETERSBURG FL 33710				DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualifect		<u> </u>	
							01/17/1996			1
2. Principal P	lace of Business	2a. Mai	ling Address			-	4. FEI Number		Ap	plied For
21		26	· ·				59-3359363		No	t Applicable
Suite, Apt. #, etc.		-	Suite, Apt. #, etc.						\$8.75 A	dditional
22		27	27				5. Certifcate of Status Desired	Ü	Fee Re	quired
City & State		City	City & State				6. Election Campaign Financing		\$5.00	May Be
23			28				Trust Fund Contribution Added to Fees			
Zip	Country	Zip	_	Cour	ntry		8. This corporation owes the cur	rent year Ir		
24	25	29)			Personal Property Tax.			□No
	9. Name and Address of Curr	ent Registere	d Agent		81 Na		10. Name and Address of New	Registered	Agent	
CHD	ISTNER, ALAN S JR				81 Na		BMJS STANDE	Z	_	
350 GULF BLVD					82 Str	et Addre	ss (P.O. Box Number is Not Accep		1	
INDIAN ROCKS BEACH FL 33785					/	₽//_	WORTH OSCIGO	1/3 /13	ive	1 1
INDIAN NOOKS BEACH I E 33765					83	١/	1/ 1/ 1/	1/1	// /	/1 // 1
				ľ	84 Cit		1/	\	85 Zip (Code L
						CLB	BRWATTERV	<u> У Г</u> (1134	6/18
office or r	egistered agent, or both, in the Sta	te of Florida. S	uch change was auth	orized	by the c	ned corpor orporation	ration submits this statement for the 's board of directors. I hereby acce	ept the appo	i changing its pintment as re	gistered
agent. I a	m familiar with, and accept the obli	gations of, Sec	tion 607.0505, Florid	a Statu	tes.					
SIGNATURE								DATE		
	Signature, typed or printed name of registered a	Gent and title if appli AND DIRECTO		13.	Agent signa	ture required	when reinstating) ADDITIONS/CHANGES TO O		ND DIRECTO	RS IN 12
TITLE	PST	WE BINEO!	DELETE	1.1 TIT	 LE	1	7.5511101107.511111020 1.0 0.		Change	Addition
NAME	TWITTY, MICHAEL T			1.2 NA						
STREET ADDRESS	6566TH ST N			ŀ	REET ADDR	ESS				ļ
CITY-ST-ZIP	ST PETERSBURG FL				Y-ST-ZIP					ļ
TITLE	<u> </u>		☐ DELETE	2.1 TIT					Change	☐ Addition
NAME				2.2 NA	ME					1
STREET ADDRESS					REET ADDR	ESS				1
CITY-ST-ZIP				1	TY-ST-ZIP	<u> </u>	-			ľ
TITLE			☐ DELETE	3.1 TIT					Change	Addition
NAME				3.2 NA	ME					
STREET ADDRESS				3.3 STI	REET ADOR	ESS				
CITY-ST-ZIP					ry-8T-ZIP					
TITLE			☐ DELETE	4,1 TIT	LE				Change	Addition
NAME				4. 2 NA	ME					
STREET ADDRESS	1			4.3 STI	REETADOR	ESS				
CITY-ST-ZIP				4.4 CIT	Y-ST-ZIP					
TITLE			☐ DELETE	5.1 TIT					Change	☐ Addition
NAME				5.2 NA	ME					
STREET ADDRESS				5.3 STI	REET ADDR	ESS				j
CITY-ST-ZIP				5.4 CIT	Y-ST-ZIP					
TITLE			☐ DELETE	6.1 TIT	LE		· · · · · · · · · · · · · · · · · · ·		Change	Addition
NAME				6.2 NA	ME					1
STORET ANDRESS				6.3 STI	REET ADDR	ESS			,	

6.4 CITY-ST-ZIP 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, or on an attachment with an address, with all other like empowered.

SIGNATURE:

4/30/99 724 588-2412