## Feb 24, 1999 8:00 am Secretary of State 02-24-1999 90051 046 \*\*\*150.00

## FILE NOW: FILING FEE AFTER MAY 1ST 18 \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #	P96000028800
1. Corporation Name	1 00000020000

INTERN	ET COMMUNICATION SERV	AICE CORP.												
Principal Place of Business Mailing Address						110	DINDI ISO IBSID		itt Makit Mairi	Y CERRET FREED C	( <b>9</b> 11) <b>40</b>	(		
47R1 N CONG	DESS AVE	4781 N. CONGRESS AVE.			1									
4781 N. CONGRESS AVE. 4781 N. CONGRESS AVE. SUITE #176 SUITE #176			1		00	NOTME	TE INI TUB	C CDACE						
LANTANA FL 3	3462	LANTANA FL 33462				<b>5</b> D-4- I	orporated or	NOT WRIT	IE IN I FIG	3 SPACE				
					[ ]		•	Qualifed						
0.00-1-10		2e Molling Address			<del>-  -</del>	03/27/ 4. FEI Num					Anni	ied For		
<b>—</b>	face of Business	2a. Mailing Address			- 1	65-066				H		Applicable		
21 Suite Ant	# ato	Suite, Apt. #, etc.				7				\$8.75 Additional				
22	Apt. #, etc. Suite, Apt. #, etc.					5. Certifcat	e of Status I	Desired	П			uired		
City & Stat						6. Election	Campaign F	inancing		\$5.0	<u>00</u> м	lay Be		
23		28				Trust Fu	nd Contribut	ion	<u> </u>	-	ed to	-		
Zip	Country	Zip	Country	,	1	B. This con	poration owe	s the curre	ent year In		_	٠,		
24	25	29 3	0	.,			Property Ta			☐Yes	2	No		
	9. Name and Address of Curre	nt Registered Agent			1	0. Name a	nd Address	of New R	egistered	Agent				
001	NAME DAVID I		81	Name										
	RMAN, DAVID L		82	Street /	Address	(P.O. Box I	Number is N	ot Accepta	ible)					
	U.S. HWY. ONE		_											
	re 303 Th Palm Beach Fl 33408		83											
NOF	IIII PALM DEACH PL 33408		84	City					FL	85 Z	Zip Co	ode		
	to the provisions of Sections 607.050			L			Al-la atatawa				ite re	agictored		
office or r	egistered agent, or both, in the State rn familiar with, and accept the obliga	of Florida. Such change was autitions of, Section 607.0505, Florid	nonzed by la Statutes	the corpo	oration s	board or dir	rectors. I he	eby accep	л ин арро	intment as	s regis	stered		
	Signature, typed or printed name of registered age		legistered Ager	nt signature re	required whe		NS/CHANGE	ER TO OF	DATE EICERS A	ND DIBEC	TOR	S IN 12		
12.		ND DIRECTORS	13. 1.1 TITLE	———		ADDITIO	15/CHANGE	:S 10 0FI	TOEKS A	Chan	ae	Addition		
TITLE	D ANNA ANNA DO		1.1 TILLE									_		
NAME	SOUSA, ALVARO			T ADDRESS	ידע	el h.	(ongre e, FL	SS AU	> <b>c</b> .	5 m k	# j	76		
STREET ADDRESS	5700 LAKE WORTH RD.				1		, EL	33	3462					
CiTY-ST-ZIP	LAKE WORTH FL 33460	☐ DELETE	1.4 CITY-S 2.1 TITLE	1-217	-4	7 467	<del>-, -</del>			☐ Chan	ige	Addition		
TITLE			2.2 NAME	Í	1									
NAME	Ì			T ADDRESS										
STREET ADDRESS CITY-ST-ZIP			2. 4 CITY-5			· -		~		•	•			
TITLE		☐ DELETE	31 TITLE							Chan	ige	Addition		
NAME			3.2 NAME											
STREET ADDRESS			3.3 STREE	T ADDRESS										
CITY-ST-ZIP			3.4. CITY-5	ST-ZIP										
TITLE		☐ DELETE	4.1 TITLE							☐ Chan	ge	☐ Addition		
NAME			4. 2 NAME											
STREET ADDRESS			4.3 STREE	T ADDRESS										
CITY-ST-ZIP			4.4 CITY-S	T-ZIP										
TITLE		☐ DELETE	5.1 TITLE				-	-		☐ Chan	ge	Addition		
NAME			5.2 NAME							,				
STREET ADDRESS			1	TADDRESS				. ,	÷			•		
CITY-ST-ZIP			5.4 CITY-S	T-ZIP		-		<del></del>				☐ Addition		
TITLE		☐ DELETE	6.1 TITLE							☐ Chan	ye	☐ Addition		
NAME .			6.2 NAME											
STREET ADDRESS	†		6.3 STREE	TADDRESS	1									

6.4 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 appendix with all other like empowered.

SIGNATURE: