

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 24, 2001 8:00 am
Secretary of State

01-24-2001 90077 041 ***150.00

DOCUMENT # P96000046033

1. Entity Name

INTERNET GLOBAL DEVELOPMENT CORPORATION

Principal Place of Business

**2591 NW 114 AVENUE
 CORAL GABLES FL 33065
 US**

Mailing Address

**2591 NW 114 AVENUE
 CORAL SPRINGS FL 33065
 US**

2. Principal Place of Business

Coral Springs Trade Center

3. Mailing Address

Coral Springs Trade Center

Suite, Apt. #, etc.

2848 University Drive

Suite, Apt. #, etc.

2848 University Drive

City & State

Coral Springs FL

City & State

Coral Springs FL

Zip

33065

Country

US

Zip

33065

Country

US

4. FEI Number

59-3384735

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional

Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**KNOUSE, ANDREW J
 2591 NW 114 AVENUE
 CORAL GABLES FL 33065**

Name

Joseph A Hansen

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

Coral Springs Trade Center

2848 University Drive

City

Coral Gables

FL

Zip Code

33065

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1-12-01

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input type="checkbox"/> Delete
NAME	KNOUSE, ANDREW J	
STREET ADDRESS	2591 NW 114 AVENUE	
CITY-ST-ZIP	CORAL SPGS FL 33065	
TITLE	VP	<input type="checkbox"/> Delete
NAME	HANSEN, JOSEPH A	
STREET ADDRESS	2591 NW 114 AVE	
CITY-ST-ZIP	CORAL SPRINGS FL 33065	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-12-01

Date

Daytime Phone #

CR2E034 (10/00)