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

PROFIT CORPORATION ANNUAL REPORT 1998

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000046102 (5)

THE INTERNET OUTPOST CAFE, INC.

FILED Feb 24 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address						
7400 GULF B		7400 GULF BLVD.						
ST. PETERSB	URG BEACH FL 33706	ST. PETERSBURG	BEACH FL 33	3706		DO NOT WRITE IN TH	HIS SPACE	
1						3. Date Incorporated or Qualified		
1						05/30/1996		
2. Principal P	laco of Businoss	2a. Mailing Address	;			4. FEI Number	[Ar	oplied For
21		[26]				59-3388039	59-3388039 Not Applicat	
Suite, Apt. #, etc.		Suite, Apt. #, etc				5. Certificate of Status Desired		Additional
22		27				5. Communic of classe Desired		equired
City & State	•	City & State				6. Election Campaign Financing	\$5.00	
23		7ip	1 6	ountry		Trust Fund Contribution	7	to Fees
Zip 24	Country	 	—	ountry	'	8. This corporation owes or has paid the		tangible □ No
24	9. Name and Address of Curre	nt Registered Agent	30	_		Personal Property Tax due June 30. 10. Name and Address of New Register 10. Personal Property Tax due June 30.		
er.	ALSKI, JOSEPH C ESQ.	Trogratoreo Agont		81	Name	10, Harro and Addison of How Hogister	ou Agoin	
SKALSKI, JUSEPH C ESQ. 4500 -140TH AVENUE NORTH								
SUITE 214				82	82 Street Address (P.O. Box Number is Not Acceptable)			
CLEARWATER FL 34622				83	l			
OL.	DEGREEN E OFFICE					· · · · · · · · · · · · · · · · · · ·		
				64	City	i	=L 65 Zip	Code
SIGNATURE	Signature, typed or profind ourse of registered of OFFICERS AN	out and the diapplicable	(NOTE Flagiste		of signature req	julred when reinstating) DA' ADDITIONS/CHANGES TO OFFICERS		
12.	PD OF FICE HS AF	ND DIHECTORS		3. 1 TIRLE		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR Change	RS IN 12 Addition
NAME	GUSTAFSON, JODI L	ניין טננני	1	NAME	-		Criange	Addition
STREET ADDRESS	6341 4TH PALM POINT				ADDRESS			
CITY-ST-ZIP	ST. PETE BEACH FL 33706			CITY-S	- 1			
TITLE	VD	DELETE		2.1 TITLE			Change	☐ Addition
NAME	GUSTAFSON, KENT R		2.2	2 NAME	ļ			
STREET ADDRESS	413 HERMOSITA DRIVE		2.3	STREET	ADDRESS			
CITY-ST-ZIP	ST. PETERSBURG FL 33706			4 CITY-S	ST-ZIP			
TITLE	STD	DELET	E 3.1	1 TITLE			☐ Change	Addition
NAME	MYERS, TIMOTHY M			NAME				
STREET ADDRESS	6341 4TH PALM POINT				ADDRESS			
CITY-ST-ZIP	ST. PETE BEACH FL 33706	□ DELET		L CITY-S	ST-ZIP	<u> </u>	D Ober	A 4399
TITLE NAME		L") DETE		TITLE	ļ		Change	Addition
STREET ADDRESS			1	2 NAME	ADDRESS			
CITY-ST-ZIP				s SIREET 4 CITY-S	· I			
TITLE		DELET		TITLE	1-28		Change	Addition
NAME				2 NAME	Ì			. 10 07/7071
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP				4 CITY-S				
TITLE		DELET		1 TITLE			Change	Addition
NAME			6.2	2 NAME				
STREET ADDRESS			6.3	3 STREET	ADDRESS			
					1			

14. Thereby 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 minual 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 few views or business of the provided by Chapter 607. Florida Statutes; and that my name appears in Block 13 if changed, or consultations and the provided by the provided by Chapter 607. Florida Statutes; and that my name appears in Block 13 if changed, or consultations and the provided by the provided by

SIGNATURE:

2-20- 98 813 360-7806