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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600046198 (3) THE INTERNET WALL, INC.

FILED Mar 27 1997 8:00am Secretary of State



Principal Place		Mailing Address			i tadilabi na isna alimatini asni sali	. Allini 1974 in Anibi 4111		
25400 U.S. 19 N. SUITE 255 25400 U.S. 19 N. SUITE 255 CLEARWATER FL 34623 CLEARWATER FL 34623-2144								
					3. Date incorporated or Qualified 05/31/1996	3a. Date of L	ast Report	
	lace of Business	2a. Mailing Address	- 0		4. FEI Number	2	Applied For	
	00 US 19N	26 25400 U Suite, Apt. #, etc.	<u>517</u>		59-339659		Not Applicable	
22 Suite 110 27 Suit			te 110		B. Certificate of Status Desired Sa.75 Additional Fee Required			
City & State Chear Water FLA 28 Chear Water			Jer 19	FLA	Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
Ζφ	Country	Zip	Coun	try	8. This corporation has liability for			
24 3462		29 34623	30	-	Florida Statutes	Yes No		
	9, Name and Address of Curre	nt Registered Agent		Name -	10. Name and Address of New Re	gistered Agent		
	TEL, ROGER P		[Tel Roger P			
25400 US 19 N., SUITE 255 CLEARWATER FL 34623				82 Street Address (P.O. Box Number is Not Acceptable) 82 5 400 U.S. 19 N. SuiTe 110				
			[0	24 City		FL 85	Zip Code	
11 Pursuant	to the provisions of Sections 607.05	02 and 607 1508. Florida State	utes the abo	ove-named co	rporation submits this statement for the	!	ping its registered	
office or r agent. La	egistered agent, or both, in the State m familiar with, and accept the obliq	e of Florida. Such change was gations of, Section 607.0505, F	authorized Iorida Statu	by the corporates.	ation's board of directors. I hereby acce	pt the appointme	int as registered	
SIGNATURE	Stip alone, typod or printed name of registered ag	nent and rule 4 approvable (NC	TF: Registered	Aneni signature regi	ulred when reinstating)	DATE		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		CTORS IN 12	
TIILE	D	DELETE	1.1 TOL	E C		. VI CI		
NAME	SCHOOLCRAFT, ROBERT B		1.2 NAA	1E	Sosemadl, JAME	-		
STREET ADDRESS	25400 U.S. 19 N, SUITE 255		1.3 STR	EET ADDRESS	25400 P.8. 19 19 2			
City-St-ZIP	CLEARWATER FL 34623		1.4 CITY	-ST-ZIP	CLEAW MILL, FL	<u> 3462B</u>		
THILE	D	DELETE	2.1 TITL	E		☐ CI	nange 🔲 Addition	
NAME	WERTEL, ROGER P		2.2 NAA	l£				
STREET ADDRESS	25400 U.S. 19 N, SUITE 255		2.3 STR	EET ADDRESS				
COLV - ST - ZIF	CLEARWATER FL 34623		2. 4 CIT	Y-ST-ZIP				
TITLE		☐ DELETE	3.1 TITL	1		LJ Cr	nange [] Addition	
NAME			3 2 NAA			199		
STREET ADORESS				EET ADDRESS				
CITY-ST-7.P		DELETE		Y-ST-ZIP			10000 1 4 4491-	
THEF		☐ DELETE	4.1 TITL	1		L. Cr	nange Addition	
NAME			4. 2 NAI					
STREET ADDRESS				EET ADORESS				
C(TY - \$1 - 7)P		DELETE		-ST-ZIP		☐ Ch	nange Addition	
TITLE		רו מניננוני.	5.1 T(TL			L) (/	wulke TT Manigau	
NAME			5.2 NAM					
STREET ADDRESS				EET ADDRESS				
CHT-ST-ZIP		DELETE		r-ST-ZIP		CH	nange Addition	
TITLE		☐ htrest	6.1 1111			i i	KINGE L ADDITION	
NAME			6.2 NAN	J				
STREET ADDRESS		•		EET ADDRESS				
CHY-ST-72			6.4 CiT	-ST-ZIP				

14. I do 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 of Block 13 if chapted, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-19-97 (813-725-8836