

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

FILED

May 06 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000050649

1. Corporation Name

INTERNET GLOBAL, Inc

Principal Place of Business

Mailing Address

440 E Sample Rd
Suite 204
Pompano, FL 33064

P.O. Box 630-698
MIAMI, FL 33163

2. Principal Place of Business 21. A BOVE	2a. Mailing Address 26. Suite Apt. #, etc.	3. Date Incorporated or Qualified 3/4/96	3a. Date of Last Report 1996
22. City & State	27. City & State	4. FEI Number 05-0649507	Applied For Not Applicable
23. Zip	28. Zip	5. Certificate of Status Desired	\$8.75 Additional Fee Required
24. Country	29. Country	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
25. Country	30. Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BARBARA FELDMAN
18557 Cherbourg Dr.
Boca Raton, FL 33496

81. Name Ted Hendel
82. Street Address (P.O. Box Number is Not Acceptable)
19958 NE 5th Ct
83. Miami, FL 33179
84. City FL 85. Zip Code 33179

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Ted Hendel

TED HENDEL

4/30/97

(Signature required for the new registered agent and the old applicable)

(NOTE: Registered Agent signature required when re-stating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Barbara Feldman	1.2 NAME	
STREET ADDRESS	18557 Cherbourg Dr	1.3 STREET ADDRESS	
CITY-ST-ZIP	Boca Raton, FL 33496	1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	President	2.2 NAME	
STREET ADDRESS	George Demacti	2.3 STREET ADDRESS	
CITY-ST-ZIP	8143 Mizner Lane	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	UP	3.2 NAME	
STREET ADDRESS	KEU HENDEL	3.3 STREET ADDRESS	
CITY-ST-ZIP	780 NE 19th St #E202	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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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 is based 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.

SIGNATURE:

SIGNATURE AND 25-05 OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KEU HENDEL

Date

Daytime Phone #

305-932-6166

CR2E034 (9/96)