FILE NOW: FILING FEE AFTER MAY 1 IS \$550.0

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 16 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9600053098 (5)

INTERNET BUSINESS CORPORATION

Principal Plac	e of Business	Mailing Address					T TOBLICOUR THE METER BITTLE BOTH ORIGINAL	AN HUNUN BUNK	,	DI FOII IOO
19008 AVENUE BAYONNES LUTZ FL 33549		19008 AVENUE BAYONNES LUTZ FL 33549-5358								
							3. Date Incorporated or Qualified 06/20/1996	3a. Da	ate of Last F	Report
2. Principal P	Place of Business	2a. Mailing Address					4. FEI Number		Ar	oplied For
21		26					59-3388756			ot Applicable
Suite, Apt		Suite, Apt. #, etc.	27				5. Certificate of Status Desired		\$8.75 Fee Re	Additional equired
		City & State	8				6. Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip <b>24</b>	Country 25	Zip <b>29</b>	30				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes   ✓ Yes   No			
	9. Name and Address of Current	Registered Agent					10. Name and Address of New R	agistered /	Agent	
	BSTER, MICHAEL R			81	Name	e				
19008 AVENUE BAYONNES Lutz FL 33549				82 Street Add			ss (P.O. Box Number is Not Accepta	ble)		·
								***************************************		
				84	City			FL	<b>85</b> Zip	Code
office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State o im familiar with, and accept the obligat	l Florida. Such change was	authoriz	zed by	the co	d corpo rporatio	oration submits this statement for the on's board of directors. I hereby accepts	purpose of	changing it ointment as	ts registered registered
SIGNATURE										##****************************
12.	Signature, typed or printed name of registered agent OFFICERS AND		13		rit signatu	ire require	d when reinstating) ADDITIONS/CHANGES TO OFFI	DATE CEBS AND	DIRECTOR	PS IN 12
THILE	D	DELETE		TITLE		T	ADDITIONOS INTOLO TO OTT	JENO AND	Change	Addition
NAME	WEBSTER, MICHAEL R		1.2		1.2 NAME					
STREET ADDRESS 19008 AVENUE BAYONNES			1.3	1.3 STREET ADDRESS		;				
CITY - ST - ZIP	LUTZ FL 33549				1.4 CITY-ST-ZIP					
TITLE	D	☐ DELETE		TITLE					Change	☐ Addition
NAME	WEBSTER, BRENDA E		2.2	NAME						
STREET ADDRESS	19008 AVENUE BAYONNES		2.3	STREET	ADDRESS	;				
CHY-ST-ZIP	LUTZ FL 33549		2.	4 CITY-S	T- 21P					
TITLE		☐ DELETE	ELETE 3.1 TITL		-				Change	Addition
NAME			3.2 NAME							
STREET ADDRESS			3.3 STREET ADDRESS		5					
City - ST - ZiP		ht: ere	3.4. CITY - ST - ZIP  DELETE 4.1 TITLE					<u> </u>	12.00	
TITLE			4.1 TITLE					Change	Addition	
NAME			4. 2 NAME							
STREET ADDRESS	<b>6</b>		4.3 STREET ADDRESS		1					
CITY ST ZIP		DELETE		CITY-S	1 - ZIP				Change	Addition
TITLE NAME		€ oreric	DELETE 5.1 TITLE 5.2 NAME					many change		
STREET ADDRESS					ADDRESS	.				
						'				
CITY - ST - ZIP TITLE		DELETE		CITY-S'	1 - ZIP	+		<del></del>	☐ Change	Addition
NAME		Em pecent		NAME					onange	Last Noticell
STREET ADORESS					ADDRESS	. [				
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14. I do hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental 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 any attachment with an address.

SIGNATURE:

SIG