

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000057167

1. Corporation Name

INTERNET SERVICE TECHNOLOGIES, INC.

Principal Place of Business

1471 SW 12TH AVE

101
POMPANO BEACH FL 33069
US

Mailing Address

1471 SW 12TH AVE

101
POMPANO BEACH FL 33069
US

FILED
May 03, 1999 8:00 am
Secretary of State

05-03-1999 90114 009 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/03/1996

4. FEI Number

NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

NORDMAN, ROBERT K
4318 N.W. 70TH LANE
CORAL SPRINGS FL 33065

1000 W McNab Rd.
Suite 109

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME NORDMAN, ROBERT K 1000 W McNab Rd.
STREET ADDRESS 4318 N.W. 70TH LANE Suite 109
CITY-ST-ZIP CORAL SPRINGS FL 33065

TITLE D ☐ DELETE
NAME HARRIS, S. BLAKE 1000 W. McNab Rd.
STREET ADDRESS 6645 NW 45TH WAY Suite 109
CITY-ST-ZIP COCONUT CREEK FL 33073 Pompano Bch. Fl.

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President, COO ☒ Change ☐ Addition
1.2 NAME Nordman Robert K
1.3 STREET ADDRESS 1000 W. McNab Rd. Suite 109
1.4 CITY-ST-ZIP Pompano Beach, FL. 33069

2.1 TITLE Vice President, CTO ☒ Change ☐ Addition
2.2 NAME Harris S. Blake
2.3 STREET ADDRESS 1000 W McNab Rd, Suite 109
2.4 CITY-ST-ZIP Pompano Beach FL. 33069

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE:

Robert K Nordman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/26/99 (954) 941-2112
Daytime Phone #

CR2E034 (1/98)