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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B, Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000065815 (8)

INTEGRATED BUSINESS INTERNET SOLUTIONS, INC.

FILED Apr 29 1997 8:00am Secretary of State



City & State	Applied For Not Applicable 5 Additional 9 Required 00 May Be ed to Fees er s. 199.032,
UTZ FL 33549 UTZ FL 335494765 3. Date Incorporated or Qualified 08,07/1996 3. Date Incorporated or Qualified 08,07/1996 4. FEI Number 59 - 3 3 96 7 5 4 Suite, Apr. e. etc	Applied For Not Applicable 5 Additional 9 Required 00 May Be ed to Fees er s. 199.032,
2. Frincipal Place of Business	Applied For Not Applicable 5 Additional 9 Required 00 May Be ed to Fees er s. 199.032,
28 Suite, Apt. #, etc Suite, Apt. #, etc. Suite, Apt. #, etc	Not Applicable 5 Additional 6 Required 00 May Be ed to Fees er s. 199.032,
Suite, Apt. #, etc 22	5 Additional Prequired DO May Be ed to Fees er s. 199.032,
City & State City	Prequired DO May Be ed to Fees er s. 199.032, Zip Code
23 26 27 20 29 30 30 30 30 30 30 30 3	ed to Fees or s. 199.032, Zip Code
Zip	Zip Code
9. Name and Address of Current Registered Agent DEMIRDJIAN, PRIMROSE 3518 SADDLE BACK LN LUTZ FL 33549 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 Registered Agent Registered Registered Agent Registered Agent Registered	o its registered
DEMIRDUIAN, PRIMROSE 3518 SADDLE BACK UN LUTZ FL 33549 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 City FL 85 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 of the corporation submits this statement for the purpose of changing dependent of the purpose of changing of the corporation submits this statement for the purpose of changing dependent of the provisions of Sections 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing dependent of the purpose of changing dependent of the provisions of Sections 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing dependent of the purpose of changing dependent of the provisions of Sections 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing dependent of the purpose of changing dependent of the purpose of changing dependent of the provisions of Sections (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Sections (P.O. Box Number is Not Acceptable) 12. City - Signature specified agent and for the purpose of Sections (P.O. Box Number is Not Acceptable) 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. LITTLE 15. PRES IDENT 16. PRES IDENT 17. PRES IDENT 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 18. ADDITIONS/CHANGES TO OFFICE	o its registered
Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Numb	o its registered
LUTZ FL 33549 83 84 City FL 85 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 difference 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 agent I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature (section pended name of registered agent and time if applicable (NOTE: Registered Agent elgenture required when reinstalling) DATE 12. OFFICE IS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. TITLE NAME 12. NAME 12. NAME 12. NAME 13. STREET ADDRESS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. CITY-SI-ZIP 14. CITY-SI-ZIP 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 15. SAAGUL BOACK have been been been been been been been be	o its registered
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CHY-ST-7P 6A CHY-ST-2IP	ige 🔲 Additio

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 or Block 13 if changed, or on an attachment with an address.