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

PROFIT CORPORATION ANNUAL REPORT

**19**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000070838 (3)

**NETCOMMERCE CORPORATION** 

## FILED May 13 1998 8:00am Secretary of State



						_	T LEBYINGO NG 10440 OHAN ONDY BOND COUN ORDIN DE			
Principal Place of Business Mailing Address										
700 TIMBERWILDE AVE. PO BOX 196725 WINTER SPRINGS FL 32708 WINTER SPRINGS FL 32719-6725										
MINIEW DEVI	MOS FL 32706	WINTER SPRINGS PL 32/19/0/25				DO NOT WRITE IN THIS SPACE				
						3.	Date Incorporated or Qualified			
							08/23/1996			
	Place of Business	2a. Mailing Address				4.	FEI Number	Ap	plied For	
21		26					59- <b>33</b> 97073		t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5.	Certificate of Status Desired	\$8.75		
City & Stat	20	City & State				Fee Required  6. Election Campaign Financing \$5.00 May Be				
23	ic.	28					Election Campaign Financing Trust Fund Contribution	Added t		
Zip	Country	Zip				+-	This corporation owes or has paid the cu			
24	25	29	30	,					No	
	9. Name and Address of Curren		<u> </u>				Name and Address of New Registered	Agent		
RO	SS, BRADLEY J			81	Name					
	TIMBERWILDE AVE.		}	82	Street Addre	ess (P	.O. Box Number is Not Acceptable)			
	NTER SPRINGS FL 32708									
4				83						
				84	City		FL	<b>85</b> Zip (	Code	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statu	ites, the al	00VB-I	named corp	oration		f changing it	s registered	
office or n	registered agent, or both, in the State om familiar with and/accept theobliga	6) Florida, Such change was Mons of, Section 607,0505. F	authorized Iorida Stat	d by t utes.	he corporati	on's b	n submits this statement for the purpose coord of directors. I hereby accept the app	ointment as	registered	
SIGNATURE	Boadle (R		ESIDEN				4/25/	93		
		nt and title if applicable (NC	IF Registered	Agent	signature require					
12.	OFFICERS AND		13.			ΑΑ	ADDITIONS/CHANGES TO OFFICERS AN			
TITLE	PS DOCEMBERG BOW	L DELETE	1.1 711					☐ Change	Addition	
NAME .	ROSENBERG, DOV 700 TIMBERWILDE AVE.		1.2 NA							
STREET ADDRESS	WINTER SPRINGS FL 32708				DDRESS					
CITY-ST-ZIP TITLE			1.4 U		- SI - ZIP			Change Addition		
NAME	BRADLEY, ROSS J	buttle	2.2 NA	-	}			C Outingo		
STREET ADDRESS	700 TIMBERWILDE AVE.		4		DDRESS					
	WINTER SPRINGS FL 32708		1							
CITY-ST-ZIP TITLE	**************************************	DELETE	3.1 (()	TY - \$1 -	- 711			Change	Addition	
NAME		<u></u>	3.2 NA						/	
STREET ADDRESS					DDRESS					
CITY-ST-ZIP			1	TY-\$1-	i				Ì	
TITLE		DELETE	4.1 Til				77 ***	Change	Addition	
NAME			4. 2 N/					2	-	
STREET ADDRESS					DORESS					
CITY-ST-ZIP				ry-ST-						
TITLE		DELETE	5.1 TIT	LE				Change	Addition	
NAME			5.2 NA	ME						
STREET ADDRESS					DDRESS			00		
CITY-ST-ZIP				Y-ST-	1		9000025245 - 05/15/98 - 01006 - 0	<b>3</b> 3		
TITLE		DELETE	6.1 TIT				<del></del>	Change	Addition	
NAME			6.2 NA	ME			***150.00	٨	K . I	
STREET ADDRESS			6.3 ST	REET AC	DORESS			4,	NU	
CITY-ST-ZiP				[Y - S1				1	1 0//1	

14. Thereby 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 or in attachment with an address.

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(11-)200-621