Mailing Address 757 SE 17 ST

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000074554

1. Corporation Name

CYBER PUB, INC.

Principal Place of Business

757 SE 17 ST

FT. LAUDERDALE FL 33316		FT. LAUDERDALE FL 33316		DO NOT WRITE IN THIS SPACE	
US		US		3. Date Incorporated or Qualifed	
				09/09/1996	}
2 Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0706052	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	·×		\$8.75 Additional
		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
		<u></u>		Trust Fund Contribution	Added to Fees
23		28	Country	8. This corporation owes the current year Intang	
Zip	Country	- }-, · - ,-	7 ' '		Yes No
24]	25	29 30	<u>''</u>	10. Name and Address of New Registered Age	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 4					
THO	ZED WILLIAM D ECO				
100	KER, WILLIAM D ESQ		82 Street Add	Iress (P.O. Box Number is Not Acceptable)	
•	N.E. THIRD AVENUE				
FOR	T LAUDERDALE FL 33304		≁ 83		
			-		85 Zip Code
		<u>.</u> .	- 84 City	FL !	83 Zip Code
A Development of Coding S07 0502 and 507 1508. Florida Statutes, the above pared corporation submits this statement for the purpose of changing its registered					
affice as societored exect, or both, in the State of Florida, Such change was sufficilized by the Compration's poard of different accept the appointment as registered.					
agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE (NOTE: Registered Appl signature required when reinstation)					
	Signature, typed or printed name of registered agen		egistered Agent signature require	ADDITIONS/CHANGES TO OFFICERS AND	DIDECTORS IN 12
12.		D DIRECTORS	13.		Change Addition
TITLE * ·	P\$	□ pere ie	1.1 TITLE		Containing
NAME .	GILLILAND, DON R		1.2 NAME	DON B. GILLAND	
STREET ADDRESS	433 NW 11 AVE		1.3 STREET ADDRESS	757 SE 175+ # 19	0.0001
CITY-ST-ZIP 7	FT LAUDERDALE FL		1.4 CITY-ST-ZIP	FI LABOERDALL, FL	2 223/8
τίπιΕ		☐ DELETE	2.1 πτLE		☐ Change ☐ Addition
NAME			2.2 NAME	مرا المراجع ال	-
STREET ADDRESS			2.3 STREET ADDRESS	, , , , , , , , , , , , , , , , , , , ,	
{		•	2. 4 CITY-ST-ZIP		}
CITY-ST-ZIP TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
			3.2 NAME		,
NAME			l l		ł
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP	<u> </u>		3.4. CITY-ST-ZIP		TChange ☐ Addition
TITLE	- ·	☐ DELETE	4.1 TITLE	L	Criainge Addition
NAME			4. 2 NAME		-36 · · · ·
_STREET ADDRESS			4.3 STREET ADDRESS		-
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE] Change ☐ Addition
NAME			5.2 NAME	, ·	
STREET ADDRESS			5.3 STREET ADDRESS		
			5.4 CITY-ST-ZIP		ļ
CITY-ST-ZIP		□ DELETE	6.1 TITLE		Change Addition
TITLE		Upice/t	6.2 NAME	_	
NAME					
STREET ADDRESS)		6.3 STREET ADDRESS	•	Y

6.4 CITY-ST-ZIP

SIGNATURE:

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.

Apr 22, 1999 8:00 am Secretary of State 04-22-1999 90024 030 ***150.00