05-05-1999 90157 023 ***150.00

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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000077709

1, Corporation Name

Principal Place of Business

THE EMAIL CHANNEL, INC.

751 PARK OF C SUITE 124 BOCA RATON F US	EL 33487	751 PARK OF COMMERCE DE SUITE 124 BOCA RATON FL 33487 US			DO NOT WRITE IN THIS 3. Date Incorporated or Qualifed 09/18/1996 4. FEI Number		polied For
 -	ace of Business	2a. Mailing Address			"	-	ot Applicable
21	-	26 Suite, Apt. #, etc. —			65-0694025	\$8.75	
Suite, Apt. #, etc.		27		5. Certificate of Status Desired			
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees	
Zip	Country	Zip	Country		This corporation owes the current year Int	angible	
24	25	29 30	5		Personal Property Tax.	☐ Yes	(⊠No
	9. Name and Address of Curren				10. Name and Address of New Registered	Agent	
			81	Name			
	ell corporate services, in Edwards & Angell	C.	82	Street	Address (P.O. Box Number is Not Acceptable)		
250 I	ROYAL PALM WAY, SUITE 300						
PALM	I BEACH FL 33840		84	City	FI	85 Zip (Code
office or re agent. I ar SIGNATURE	egistered agent, or both, in the State n familiar with, and accept the obliga	of Florida. Such change was auth	orized by a Statutes	tne corp	corporation submits this statement for the purpose of oration's board of directors. I hereby accept the appointment of the purpose of oration's board of directors. I hereby accept the appointment of the purpose of oration's board of directors.	changing its ntment as re	registered gistered
	Signature, typed or printed name of registered ager		<u> </u>	it signature i	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTO	DS IN 12
12.		ID DIRECTORS XX DELETE	13.		VP	☐ Change	Addition
TITLE	S	X & DECE IE			1		A.X
NAME	MCLAUGHUN, JOHN J		1.2 NAME		Kopec, Edward K.		
STREET ADDRESS	85 SW 11TH CT			FADDRESS	OUDEN SCICITION IVE		
CITY-ST-ZIP	BOCA RATON FL 33486	- FI SOURTE	1.4 CITY-S	T-ZiP	Boca_Raton_FL 33433	☐ Change	
TITLE	10		2.1 TITLE		Asst. Sec.	☐ Change	Addition
NAME	LAWLOR, JOHN	_	2.2 NAME		Stare, Diana L.		
STREET ADDRESS	3465 N.W. 27TH AVENUE	ļ	2.3 STREE	T ADDRESS	3480 Pine Walk Drive N., #1	28	
CITY+ST-ZIP			2. 4 CITY-S	T-ZIP_	Margate FL 33063		
TITLE	D XX DELETE 3.11		3.1 TITLE		ן די פו	Change	☐ Addition
NAME	STEFFANN, LAWRENCE F 32		3,2 NAME		Poliner, Randall		
STREET ADDRESS	DDRESS 2850 N.W. 26TH COURT 333		3.3 STREE	T ADDRESS	P.O. Box 410730		
CITY-ST-ZIP	ZIP BOCA RATON FL 33434				Melbourne FL 32941		
TITLE		☐ DELETE	4.1 TITLE		D SEE SEE SEE SEE SEE SEE SEE SEE SEE SE	☐ Change	☐ Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREE	TADDRESS	Gregory, Dale		
CITY-ST-ZIP			4.4 CITY-S	T-ZIP	1615 Parkside Circle, South		
TITLE		☐ DELETE	5.1 TITLE		Boca Raton, Florida 33486	Change	Addition
NAME .			5.2 NAME				
STREET ADDRESS			5.3 STREE	TADDRESS			
CITY-ST-ZIP			5.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	6.1 TITLE			Change	☐ Addition
NAME			6.2 NAME				
		· ·	■ 6.3 STREE	LADDRESS	1		

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 angual 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 received 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 attactor ent with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP