SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998

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Zip

Suite, Apt. #, etc.

City & State



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000078202 (4)

INTERNATIONAL INTERNET INCORPORATED OF AMERICA

Principal Place of Business Mailing Address C/O WESTGATE C/O WESTGATE 810 GULLBERRY LANE **BIO GULLBERRY LANE** ALTAMONTE SPRINGS FL 32714 ALTAMONTE SPRINGS FL 32714 2. Principal Place of Business

Country

3. Date Incorporated or Qualified 09/20/1996 2a. Mailing Address 4. FEI Number 59-3401224 26 Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired

27 City & State 6. Election Campaign Financing 28 Trust Fund Contribution Country Zip 8. This corporation owes or has paid the current year Intangible

Yes Personal Property Tax due June 30. 10. Name and Address of New Registered Agent

FILED

Oct 01 1998 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

Applied For

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

CR2E034 (5/98)

25 29 9. Name and Address of Current Registered Agent 81 WESTGATE, DEBORAH L Name 810 GULBERRY LANE Street Address (P.O. Box Number is Not Acceptable) 82 **ALTAMONTE SPRINGS FL 32714** 83 City Zip Code

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 Signalure, typod or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE 1.1 TITLE _ DELETE Change Addition WESTGATE, DEBORAH L NAME 1.2 NAME 810 GULBERRY LANE STREET ADDRESS 1.3 STREET ADDRESS **ALTAMONTE SPRINGS FL 32714** 1.4 CiTY-ST-ZiP CITY-ST-ZIP TITLE DELETE 2.1 TITLE Addition ___ Change LAWRENCE, JUDITH E 2.2 NAME NAME **4829 BARCELONA CIRCLE** STREET ADDRESS 2.3 STREET ADDRESS NAPLES FL 34112 CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE __ DELETE 3.1 TITLE __ Change Addition WESTGATE, THOMAS L NAME 3.2 NAME 810 GULBERRY LANE STREET ADDRESS 3.3 STREET ADDRESS ALTAMONTE SPRINGS FL 32714 CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE 4.1 TITLE DELETE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE 5.1 TITLE DELETE Addition NAME 5.2 NAME \$TREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP B.1 TITLE TITLE __ DELETE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 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