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

PROFIT CORPORATION 4 ANNUAL REPORT

1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham P

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000078792 (4)

INET COMMERCE CONDUIT CORP.

FILED	
Mar 03 1998 8:00an	n
Secretary of State	

			- [
Principal Place of Business		Mailing Addregs				(1) 920/1 1249/ 1410/ 1	2410 14110 1141 1051	
1428 BRICKELL AVENUE		1429 BRICKELL AVENUE						
BTH FLOOR		BTH NUOR						
MIAMI FL 33131 MIAMI PL/33131		DO NOT WRITE IN THIS SPACE						
					3. Date Incorporated or Qualified			
					09/20/1996			
2. Principal Place of Business		2a. Mailing Address			4. FEI Number		Applied For	
21 5100 Town Center	Circle	26 5100 Town Ce	enter C	ircle	65-0705830		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	S8.75 Additions		
22 Suite 330		27 Suite 330			Fee Req		Fee Required	
City & State		City & State			6. Election Campaign Financing	\$	5.00 May Be	
23 Boca Raton, Flor	ida	28 Boca Raton.	Florid	la	Trust Fund Contribution		dded to Fees	
	intry	Zip	Count		8. This corporation owes or has paid the current year Intangible			
24 33486 25 Pa	alm Beach	29 33486	30 Pal	m Beach	Personal Property Tax due June	30. 🔲 Yes	No No	
9, Name and Ad	dress of Current F	Registered Agent	·		10. Name and Address of New Registered Agent			
LITTINAIN ERIC P			8		ident America Tre			
LIIG ACSIGNIC LICA								
1428 BROXELL AVENUE 82 Street A 5100			5100 To	own Center Circle, Suite 330				
			8:		7 VOI.VOI. VII.VII.VI			
miami FL 33131								
			8	Boca Ra		FL 85	33486	
11. Pursuant to the provisions of 5	Sections 607.0502 a	and 607 1508, Florida Statu	les, the abo	ve-named corpo	oration submits this statement for the	ourpose of char	ging its registered	
office or registered agent. et agent. I am familia, with, ap	lein, i n the State of accept the oblivialis	Fiorida, Such change was ons of Section 607.0505. Fl	autnorizeg t orida Statut	by the corporations.	on's board of directors. I hereby acce	, ,		
agone i anti laminia, mai, appr	CONTRACTOR OF THE STATE OF THE	5., 5.	The Court			2/2/2/2	<i>~</i> ,	

SIGNATURE (NOTE: Registered Agent signature regulred when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change K X Addition **DELETE** 1,1 TITLE TITLE Ross Wilson 5100 Town Center Circle, Suite 330 LOMILLO LAURIE 1.2 NAME NAME W.W. 91ST AVENUE 1,3 STREET ADDRESS STREET ADDRESS Boca Raton, Florida 33486 CITY-ST-ZIP 1.4 CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE TITLE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ D€LETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZiP CITY-ST-ZIP Change Addition ☐ DELETE 6.1 TITLE TITLE 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

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 of the receiver of trustee emperged to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, or profin altaghment with an address.

6.4 CITY-ST-ZIP

2/11/00