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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000095606 (5)

CYBER MARKETING, INC.

Principal Place of Business	Mailing Address		
19638 COLORADO CIRCLE	19638 COLORADO CIRCLE		
BOCA RATON FL 33434	BOCA RATON FL 33434		

FILED Apr 28 1998 8:00am Secretary of State

Principal Place	of Business	Mailing Address		4 IAMFIAMEL FIN INCIDA STITLL AND LEI MAREIL AM	iai durid ididi diran asan aara arin 1881		
19638 COLORADO CIRCLE BOCA RATON FL 33434 19638 COLORADO CIRCLE BOCA RATON FL 33434			DO NOT WRITE	IN THIS SPACE			
				3. Date Incorporated or Qualified			
		1 - 1 - 1 - 1		11/22/1996			
<u> </u>	ace of Business	2a. Mailing Address		4. FEI Number	Applied For		
21	4	Cuito Apt # etc		65-0708753	Not Applicable \$8.75 Additional		
Suite, Apt.	#, e (C.	Suite, Apt. #, etc.		5. Certificate of Status Desired	Fee Required		
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be		
23		28		Trust Fund Contribution	Added to Fees		
Z ip	Country	Zip	Country	8. This corporation owes or has pa			
24	25		30	Personal Property Tax due June			
	9. Name and Address of Currer	it Registered Agent	B1 Name	10. Name and Address of New Re	gistered Agent		
XIII	ENLAWYER CHARTERED		LAN SILVING BA	Pi-			
- 348 ALMERIA AVENUE 8			62 Street Add	dress (P.O. Box Number is Not Acceptat	ole) / -		
- 62	RALES FL 83134		63 2	> 6 COCO 279700	UN.		
			Six				
			84 City	- Pa	EI 85 Zip Code		
44.5	1	O and COT 4500 Clavida Ptatula	a the shows named as	constinue submits this statement for the s	yurpass of changing its registered		
office or re	to the provisions of Sections 607:050 egistered agent, or both, in the State	e of Florina, such change was at	thorized by the corpora	rporation submits this statement for the pation's board of directors. I hereby accept	of the appointment as registered		
agent. I a	m familiar with and accept the oblig	ations of Section 607.05050 Flori	rida Statutes.	4//	20/00		
SIGNATURE	Signature who or printed name of registred age	and title applicable (NOTE:	Registered Agent signature regi	ured when reinstation)	DATE		
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12		
TITLE	PSTD	DELETE	. 1.1 TITLE		Change Addition		
NAME	SILVERBERG, ALAN		1.2 NAME				
STREET ADDRESS	19638 COLORADO CIRCLE		1.3 STREE1 ADDRESS	•	•		
CITY-ST-ZIP	BOCA RATON FL 33434		1.4 CITY - ST - ZIP				
TITLE		☐ DELETE	2.1 TITLE		Change Addition		
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREET ADDRESS				
CITY-ST-ZIP			2.4 CITY-ST-ZIP				
TITLE		L DELETE	3.1 TITLE		Change Addition		
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP		T DELETE	3 4. CITY - ST - ZIP		Change Addition		
TITLE		☐ DELETE	4 1 TITLE		Change Chadelion		
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP		DELETE	4.4 CITY - ST - ZiP 5.1 TITLE		Change Addition		
TITLE		Otter	5.2 NAME				
NAME CTOSET ADDRESS			5.3 STREET ADDRESS				
STREET ADDRESS			5.4 CITY-S1-ZIP				
CITY-ST-ZIP TITLE		DELETE	6.1 TITLE		Change Addition		
NAME			6.2 NAME		-		
STREET ADDRESS			6.3 STREET ADDRESS				
OTTY OT 710			6 A CITY - ST - 7IP				
14. I hereby o	certify that the information supplied v	vith this filing does not qualify for	the exemption stated	n Section 119.07(3)(i), Florida Statutes. I	further certify that the information		
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 this seempton as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attacture with an address.							