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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000101549 (9)

INTERNET TECHNOLOGIES, INC.

Principal Place of Business Mailing Address								-			
3825 HENDERSON BLVD. STE 100 TAMPA FL 33629				3825 HENDERSON BLVD. STE 100 TAMPA FL 33629-5000							
								3. Date Incorporated or Qualified 12/17/1996	3a. Dale of I	asl R	eport
2. Principal P	lace of Busin	2a. Ma	2a. Mailing Address				4. FEI Number Applied For				
21			26	<u> </u>				Not Applicable			
Sulte, Apt.			27	<u></u>				5. Certificate of Status Desired Fee Required			
City & Stat	e		City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip Country			· · · · · · · · · · · · · · · · · · ·	Zip Country				This corporation has liability for intangible tax under s. 199.032,			
24 25			29					Florida Statutes 🔲 Yes 💢 No			
9. Name and Address of Current Registered Agent								10. Name and Address of New Registered Agent			
JACOBSON, MELVIN S						B1	Name	ıe			
		ON BLVD. STE 10	0			82	Street Addre	ess (P.O. Box Number is Not Acceptab	le)		
TAMPA FL 33829						B3					
					1	84	City		FL 85	Zip (Code
11. Pursuant office or r	to the provis	ions of Sections 607. gent, or both, in the S	0502 and 607.1 tate of Florida.	508, Florida Statu Such change was sction 607,0505, Fl	tes, the ab authorized orida Statu	ove by	named corp the corporati	oration submits this statement for the p on's board of directors. I hereby accep	urpose of chan	ging it ant as	s registered registered
SIGNATURE											
12.	Signature, typed	or printed name of registered	agent and tille if ap AND DIRECTO		13.	Ager	nt signature require	ed when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE SOLD FAIOL	CLOL	2C 1NL 40
TITLE	PD	OFFICEING	AND DIRECTO	DELETE	1.1 1111	F		ADDITIONS/OFFMOLS TO OFFIC	Cr		Addition
NAME	DEDIEGO			1.2 NAI						122	
STREET ADDRESS		NDERSON BLVD. S	TE 100				ADDRESS				
CITY-ST-ZIP TAMPA FL 33629				1.4 CI							
TITLE	STD			DELETE	2.1 1(1)				☐ Cr	nange	Addition
NAME	1	ON, MELVIN S			2.2 NA	ИE					
STREET ADDRESS		NDERSON BLVD. S	TE 100	2.3 S			ADDRESS				
CITY-ST-ZIP	TAMPA F			2.40			ST - 21P				
TITLE				☐ DELETE	3.1 TITI	.E			CH	nange	Addition
NAME					3.2 NA!	۸E					
STREET ADDRESS	et address					EF1	ADDRESS				
CITY-ST-ZIP					3.4. C(1	Y - S	1- <i>2</i> (P				
TITLE				DELETE	4.1 TITI	.E			□ ct	nange	Addition
NAME					4.2 NA	ME					
STREET ADDRESS					4.3 STA	EET.	ADDRESS				
CITY-ST-ZIP					4.4 CIT	Y-\$1	T-ZIP				
TITLE				DELETE	5.1 7(1)	.€			L Ct	nange	Addition
NAME					5.2 NAF	ΛE					
STREET ADDRESS					5.3 STR	EET .	ADDRESS				
CITY-ST-ZIP	<u> </u>			The second	5.4 CiT		1-7IP				
TITLE				☐ DELETE	6.1 TITE				∐ Cr	nange	Addition
NAME]				6.2 NA						
STREET ADDRESS					6.3 S1R	EET .	ADDRESS				

14. I do 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 frustee 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 lin attachment with an address.

4/20/97

813-286-7710

FILED

May 06 1997 8:00am

Secretary of State