FILE NOW: FILING FEE AFTER Y 1ST IS $550.00

PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 30, 2000 8:00 am
Secretary of State
03-30-2000 90061 005 ***150.00

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Corporation Name
CREDIT INTERNET CORPORATION

Principal Place of Business
WYETH DR
OMIS FL 34274

Mailing Address
P O BOX 1272
NOKOMIS FL 34274
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
01/17/1997

4. FEI Number
65-0729292
☐ Applied For
☐ Not Applicable

Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

2a Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip 29 Country 30

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

WOLFE, LARRY
200 - A JOHN KNOX ROAD
TALLAHASSEE FL 32303-6643

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

OFFICERS AND DIRECTORS

D ☐ DELETE
ADDRESS
ST ZIP

D ☒ DELETE
FORNEY, JENNIFER
2011 WINDWARD PT.
DISCOVERY BAY FL 94514

D ☐ DELETE
MORERNO, WILLIAM
1139 BAL HARBOR BLVD., SUITE 173
PUNTA GORTA FL 33950

☐ DELETE
ADDRESS
ZIP

☐ DELETE
ADDRESS
ZIP

☐ DELETE
ADDRESS
ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition
13.1 TITLE PRESIDENT
13.2 NAME JACK D. NICHOLSON
13.3 STREET ADDRESS 1139 BAL HARBOR BLVD, SUITE 173
13.4 CITY-ST-ZIP PUNTA GORDA, FL 33950

☐ Change ☐ Addition
21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

☐ Change ☐ Addition
31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

☐ Change ☐ Addition
41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

☐ Change ☐ Addition
51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

☐ Change ☐ Addition
61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

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 with an address, with all other like empowered.

SIGNATURE: [signature] 4/24/00 561-275-8753
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
WILLIAM MORERNO
Date Daytime Phone #