

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**



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Sep 11 1998 8:00 am**  
**Secretary of State**

**DOCUMENT # P97000015356 (3)**

1. Corporation Name

**I - COMMERCE 1 INC.**

Principal Place of Business

**P O BOX 142111  
GAINESVILLE FL 32614**

Mailing Address

**P O BOX 142111  
GAINESVILLE FL 32614**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**02/13/1997**

4. FEI Number

**59-3434192**

Applied for  
Not Applicable

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 or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☒ No

10. Name and Address of New Registered Agent

2. Principal Place of Business

**21** Suite, Apt #, etc.

**22** City & State

**23** Zip Country

**24** **25**

2a. Mailing Address

**26** Suite, Apt #, etc.

**27** City & State

**28** Zip Country

**29** **30**

9. Name and Address of Current Registered Agent

**PARTRIDGE, SEBRON K  
5030 SW 88TH TERR  
GAINESVILLE FL 32608**

**81** Name

**82** Street Address (P.O. Box Number is Not Acceptable)

**83**

**84** City

**FL** **85** Zip Code

11. 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

**12. OFFICERS AND DIRECTORS**

**12.** **CEO** ☐ DELETE

**NAME** **Sebron K. Partridge**

**STREET ADDRESS** **5030 SW 88th Terr**

**CITY-STATE-ZIP** **Gainesville FL 32608**

**13.** ☐ DELETE

**NAME**

**STREET ADDRESS**

**CITY-STATE-ZIP**

**14.** ☐ DELETE

**NAME**

**STREET ADDRESS**

**CITY-STATE-ZIP**

**15.** ☐ DELETE

**NAME**

**STREET ADDRESS**

**CITY-STATE-ZIP**

**16.** ☐ DELETE

**NAME**

**STREET ADDRESS**

**CITY-STATE-ZIP**

**17.** ☐ DELETE

**NAME**

**STREET ADDRESS**

**CITY-STATE-ZIP**

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

☐ Change ☐ Addition

**500002637665-2**

**-09/11/98-01083-007**

**\*\*\*\*150.00 \*\*\*\*150.00**

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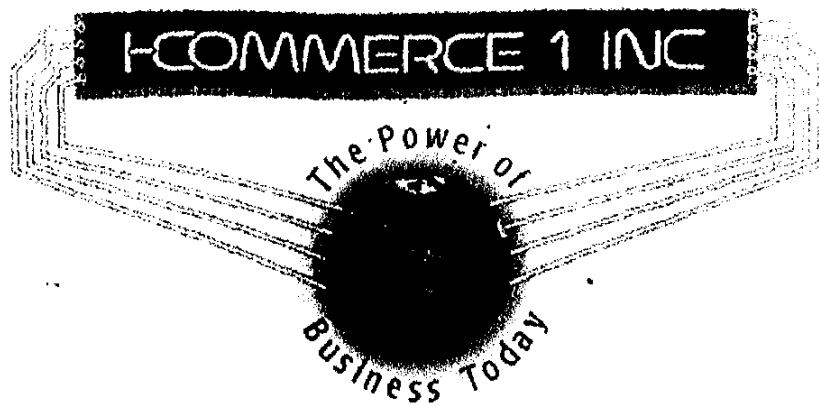
☐ Change ☐ Addition

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 with an address.

SIGNATURE:

**7/9/98 352-214-0967**

CR2E034 (5/98)



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PO Box 142111  
Gainesville FL, 32614

Dear Sir or Madam,

I did not receive the first notification for Corporate dues. I spoke to someone there on the phone and she assured me that if this were the case to write you a letter and append it to my submission and these charges would be waived since this is the first year of corporate existence. I do hope that this is the case as I cannot afford these penalties at this time. I would greatly appreciate your help in this matter.

Sebron K. Partridge  
I-Commerce 1, Inc.  
Computer Consultants Consortium Corporation  
352-214-0967