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

CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000017621

1. Corporation Name

FILED Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90116 014 ***150.00

NSYNC INTERNET SERVICES, INC.									
	,								
Principal Place of Business Mailing Address						f ilbättälät csa sattu ilbätt datis onivi ons	51 98 +81 1781+ 1	3018 01130	(1881 HO) (88)
16720 BRASSART ROAD 16720 BRASSART ROAD LUTZ FL 33549 LUTZ FL 33549						DO NOT WRITE IN	I THIS SPA	ACE	•
•		•				3. Date Incorporated or Qualifed	11110017	,	
	•					02/25/1997	•*		
2. Principal Pl	ace of Business	2a. Mailing Address	a. Mailing Address			4. FEI Number	·	Ap	plied For
21		26				59-3428729			t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certifcate of Status Desired	\$	8.75 A Fee Re	dditional
22		21				-			
City & State		——————————————————————————————————————	City & State			6. Election Campaign Financing Trust Fund Contribution	;	\$5.00 Added to	
Zip Country		28 Zin	Zip Country			This corporation owes the current y	ear Intangi		01003
24 25 29 30				,		Personal Property Tax.			□No
9. Name and Address of Current Registered Agent						10. Name and Address of New Regis	tered Age	nt	
			81	Name					
SPIEGEL & UTRERA, P.A.			82	Street	Addres	ss (P.O. Box Number is Not Acceptable)			
	ALMERIA AVENUE		51 50 ECT Address (1 : 4						
CORAL GABLES FL 33134			83	3					
			84	City			. 8	5 Zip C	Code
						,	<u>FL</u>	<u> </u>	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes, of Florida, Such change was auth	, the abov	re-named the come	corpor oration	ation submits this statement for the purp 's board of directors. I hereby accept the	ose of char appointme	iging its int as re	registered ;
agent. I a	m familiar with, and accept the obliga	tions of, Section 607.0505, Florid	a Statute	s.					1
SIGNATURE		MOTE D	N		ran irad u	when reinstating) D	ATE		
12.	Signature, typed or printed name of registered ager OFFICERS AN	ID DIRECTORS	13.	ini aignatula i	edoneo +	ADDITIONS/CHANGES TO OFFICE		IRECTO	RS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE					Change	Addition
NAME	LANPHERE, DANIEL L		1.2 NAME						
STREET ADORESS	16720 BRASSART ROAD		1.3 STREE	T ADDRESS					1
CITY-ST-ZIP	LUTZ FL 33549		1,4 CITY-5	ST-ZIP					
TITLE	VD .	☐ DELETE	2.1 TITLÉ					Change	☐ Addition
NAME	MORGAN, JERRY A		2.2 NAME		ļ				ļ
STREET ADDRESS	16720 BRASSART ROAD		2.3 STREE	TADORESS					
CITY-ST-ZIP	LUTZ FL 33549			ST-ZIP_					
TITLE	-		3.1 TITLE				L	Change	Addition
NAME	William I orange b		3.2 NAME			•		-	
STREET ADDRESS	10,20 0,100,11, 110,10			ET ADDRESS		· ·	. <u></u> . ·	`	
CITY-ST-ZIP .			3.4. CITY-	ST-ZIP	 			Change	Addition
TITLE		□ DELETE	4.1 TITLE	_	ļ			Strange	
NAME			4. 2 NAME		ļ				}
STREET ADDRESS			1	ET ADDRESS					
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-1	51-ZIP				Change	Addition
NAME		<u> </u>	5.2 NAME					-	İ
STREET ADDRESS				ET ADDRESS					
CITY-ST-ZIP			5.4 CITY-						
TITLE		□ DELETE	6.1 TITLE		·			Change	☐ Addition
NAME			6.2 NAME						{
STREET ADDRESS			6.3 STREE	ET ADDRESS					
CITY-ST-ZIP			6.4 CITY-	ST-ZIP		·			

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, with all other like empowered.

SIGNATURE: