PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000022609

1. Corporation Name

WEB ARBITRATION, INC.

FILED May 03, 1999 8:00 am Secretary of State

05-03-1999 90031 028 ***150.00



Principal Plac	e of Business		ailing Address							
2649 MARATH			49 MARATHON LANE							
FORT LAUDERDALE FL 33312 FORT LAUDERDALE FL 33312							DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualifed			
							03/12/1997			
·	Place of Business	2a.	Mailing Address				4. FEI Number			plied For
21	<u> </u>	26					APPLIED FOR			t Applicable
Suite, Apt.	#, etc.	<u> </u>	Suite, Apt. #, etc.				5. Certificate of Status Desired	ב	\$8.75	Additional equired
City & Sta		27	City & State				6 Fleeties Compaign Financing			May Be
23	ie ,	20	City & State				6. Election Campaign Financing Trust Fund Contribution]		May Be to Fees
Zip	Country	28	Zip	Co	untry		8. This corporation owes the current	vear Inta		
24	25	29	•••	30	•		Personal Property Tax.	,	Yes	□No
	9. Name and Address of Curr		stered Agent				10. Name and Address of New Reg	istered A	gent	,
					81	Name				İ
1	odward, sarah _				82	Street Addr	ess (P.O. Box Number is Not Acceptable	 _		-
I	9 MARATHON LANE				-	Ollooringer	COO (1:0: Box (tallibor to right to organization	,		
FOF	IT LAUDERDALE FL 33312				83					
i					84	City			85 Zip	Code
İ	,				04	City		FL	1031 215	0000
agent. I a	am familiar with, and accept the oblig							DATE		
12.	OFFICERS A	AND DIRE		13			ADDITIONS/CHANGES TO OFFIC	ERS ANI		RS IN 12
TITLE	D		☐ DELETE		TTLE				Change	☐ Addition
NAME	WOODWARD, SARAH				IAME		·			
STREET ADDRESS	1	•				TADDRESS				
CITY-ST-ZIP	FORT LAUDERDALE FL 3331	2	☐ DELETE		XITY-S	T-ZIP			Change	Addition
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NAME	WOODWARD, TERRY			·	NAME					!
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TITLE				5.4 (CITY-S	T-ZIP				
			☐ DELETE		OTY-S'	T-ZIP			☐ Change	☐ Addition
NAME			☐ DELETE	6.1		T-ZIP			Change	☐ Addition

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 or Block 14 or Block 15 or Block 1

6.4 CITY-ST-ZIP

SIGNATURE

SIGNATURE REQUIRED TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR