

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000090280

1. Entity Name  
YUPI INTERNET INC.



FILED

05 FEB -8 PM 3:43

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
ONE MICROSOFT WAY  
REDMOND, WA 98052-6399 US

Mailing Address  
ONE MICROSOFT WAY  
REDMOND, WA 98052-6399 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1192005

Chg-P

CR2E034 (10/03)

4. FEI Number  
65-0796526

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
DPT  
SEETHOFF, JOHN  
ONE MICROSOFT WAY  
REDMOND, WA 980526399 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition  
400046209404

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
DVS  
FAY, KEVIN J  
ONE MICROSOFTWAY  
REDMOND, WA 980526399 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☒ Addition  
DVS  
Belliver, Keith R.  
ONE Microsoft Way  
Redmond, WA 98052-6399

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
D  
TAYLOR, ADAM  
1688 MERIDIAN AVENUE -10TH FLOOR  
MIAMI, FL 33139 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☒ Addition  
Assistant Secretary  
Orndorff, Ben  
ONE Microsoft Way  
Redmond, WA 98052-6399

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*BEN ORNDORFF*  
BEN ORNDORFF, Asst. Secretary 2-305 425-706-8080  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 190321 4726922

AUTHORIZATION :

*Patricia Pizito*

COST LIMIT : \$ 150.00

ORDER DATE : February 7, 2005

ORDER TIME : 11:07 AM

ORDER NO. : 190321-020

CUSTOMER NO: 4726922

CUSTOMER: Ms Anita Pedersen  
Microsoft Corporation Legal  
Bldg. 8  
One Microsoft Way  
Redmond, WA 98052-6399

ANNUAL REPORT FILING

NAME: YUPI INTERNET INC.

RECEIVED  
05 FEB - 8 PM 12:56  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan - Ext. 2955

EXAMINER'S INITIALS: \_\_\_\_\_