

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 15, 2001 8:00 am
Secretary of State

03-15-2001 90007 042 ***150.00

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1. Entity Name
INTERNET COMMUNICATION INSTYLE, INC.

Principal Place of Business

2623 COOLIDGE ST
 HOLLYWOOD FL 33020
 US

Mailing Address

2623 COOLIDGE STREET
 HOLLYWOOD FL 33020

LUUJ3J0J



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

10185 Collins Ave
 Suite, Apt. #, etc.
 Suite 512

10185 Collins Ave
 Suite, Apt. #, etc.
 Suite 512

City & State
 Bal Harbour, FL

City & State
 Bal Harbour

4. FEI Number **65-0790402**

Applied For
 Not Applicable

Zip
 33154

Country
 USA

Zip
 33154

Country
 USA

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

FELDENKRAIS, MICHAEL
 12000 BISCAYNE BLVD. STE. 220
 NORTH MIAMI FL 33181

Name
Michael Feldenkrais
 Street Address (P.O. Box Number is Not Acceptable)
290 NW 165 Street Suite P-100

City
Miami FL Zip Code
33169

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.

SIGNATURE

DATE
3/12/01

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
P
BRODERSEN, T
2623 COOLIDGE ST
HOLLYWOOD FL 33020 Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 Change Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
VP
SCHWARTZ, B
2623 COOLIDGE ST
HOLLYWOOD FL 3320 Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
P, VP
Schwartz, William
10185 Collins Ave Suite 512
Bal Harbour, FL 33154 Change Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
BROD
ERSEN, R
2623 COOLIDGE ST
HOLLYWOOD FL 33020 Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 Change Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
S
 Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
S, T
Lynn Lewis
10185 Collins Ave Suite 512
Bal Harbour, FL 33154 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

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date
3/12/01

Daytime Phone #
(305) 866-7760

CR2E034 (10/00)