

AMOUNT DUE ON OR BEFORE 09/15/99: \$350 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT
CORPORATION
ANNUAL REPORT
1999**


FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Sep 07, 1999 8:00 am
Secretary of State

09-07-1999 90005 028 ***150.00

DOCUMENT # P97000108328
Corporation Name

L.A. INTERNET, INC.



Principal Place of Business
10 VENTURA DRIVE
LRAV BEACH FL 33484

Mailing Address
5240 VENTURA DRIVE
DELRAY BEACH FL 33484

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 01/01/1998	
4. FEI Number 65-0804025	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. This corporation owes the current year's Intangible Personal Property. <input type="checkbox"/> Yes <input type="checkbox"/> No	

Principal Place of Business	2a. Mailing Address	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.	27
City & State	City & State	28
Zip	Country	29
25	29	30

9. Name and Address of Current Registered Agent

ESTIME, GILBERT
444 BRICKELL AVENUE
SUITE 51-221
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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		(NOTE: Registered Agent signature required when reinstating)		DATE	
Signature, typed or printed name of registered agent and title if applicable.					
OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
ET ADDRESS	ASHKENAS, LARRY	1.2 NAME			
ST-ZIP	5240 VENTURA DRIVE	1.3 STREET ADDRESS			
	DELRAY BEACH FL 33484	1.4 CITY-ST-ZIP			
	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
ET ADDRESS		2.2 NAME			
ST-ZIP		2.3 STREET ADDRESS			
	<input type="checkbox"/> DELETE	2.4 CITY-ST-ZIP			
ET ADDRESS		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
ST-ZIP		3.2 NAME			
	<input type="checkbox"/> DELETE	3.3 STREET ADDRESS			
ET ADDRESS		3.4 CITY-ST-ZIP			
	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
ET ADDRESS		4.2 NAME			
ST-ZIP		4.3 STREET ADDRESS			
	<input type="checkbox"/> DELETE	4.4 CITY-ST-ZIP			
ET ADDRESS		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
ST-ZIP		5.2 NAME			
	<input type="checkbox"/> DELETE	5.3 STREET ADDRESS			
ET ADDRESS		5.4 CITY-ST-ZIP			
	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
ET ADDRESS		6.2 NAME			
ST-ZIP		6.3 STREET ADDRESS			
	<input type="checkbox"/> DELETE	6.4 CITY-ST-ZIP			

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(f), 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:

LARRY ASHKENAS
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/1/99
Date

561-637-3816
Daytime Phone #

CR2E034 (5/99)