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

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P9800003182

WEB BRAG CORPORATION

I								
Principal Place of Business Mailing Address								
3908 26TH STREET WEST BRADENTON FL 34205  3908 26TH STREET WEST BRADENTON FL 34205				DO NOT WRITE IN THIS S		IS SPACE		
					3. Date Incorporated or Qualifed			
1					01/09/1998			
Principal Place of Business     2a. Mailing Address					4. FE Number 372980	<del> </del> -	plied For	
21 26							t Applicable	
Suite, Apt. #, etc   Suite, Apt. # etc				5 Certificate of Status Desired		\$8.75 Additional Fee Required		
27   City & State   City & State					6. Election Campaign Financing	<del></del>	·	
23 28 28					Trust Fund Contribution		\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country		This corporation owes the current year	Intangible		
24	25	29 30	0		Personal Property Tax.	Yes	<b>K</b> No	
	9. Name and Address of Curre	nt Registered Agent		,	10. Name and Address of New Registere	d Agent		
			81	Name				
FELDMAN, MARC H				82 Street Address (P.O. Box Number is Not Acceptable)				
3908 26TH STREET WEST								
BRADENTON FL 34205-3510								
	•		84	City	F	85 Zip 0	Code	
		00 1007 1500 Flands Chabites	155	named cor	poration submits this statement for the purpose	<b>-</b> 1	registered	
office or r	to the provisions of Sections 607 05 egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change was auth	norized by	the corporat	ion's board of directors. Thereby accept the app	ointment as re-	gistered	
SIGNATURE								
	Signature, typed or printed name of registered ad		egistered Agei	nt signature requii	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	)RS IN 12	
12.	D/P	ND DIRECTORS ☐ DELETE	1 1 TITLE		ADDITIONS/GUARGES TO GLYTOERG	Change	Addition	
NAME	DEMBSKY, JILL	₩	1 2 NAME					
STREET ADDRESS	92 SUNNYBROOK DRIVE			T ADDRESS			ı	
CITY-ST-ZIP	EDEELIOLD ALL OTTOO		1 4 CITY- ST- ZIP					
TITLE	S√T □ DELETE 21		2 1 TITLE			Change	Addition	
NAME	S/T DEMBSKY, MAURICE  92 SUNNIBROOK DR  FREEHOD, NJ 07728 DELETE  31		2.2 NAME					
STREET ADDRESS	DDRESS 93 CINAMIZONIC DR		2 ° STRFF	TADDRESS				
CITY-ST-ZIP	ERECILAD ALT	07728	2.4.0174-5	3T 7.P			<del></del>	
TITLE	· 160 A 400 / 100	O 1700 DELETE	3.1.7IT(E			Change	Addition	
NAME			3.2 NAME					
STREET ADDRESS			1	TADDRESS				
CITY-ST-ZIP		[ ] DELETE	3.4 CITY-5	ST-ZIP		Change	Addition	
TITLE		ן_,  טבנפוב	4 1 TITLE 4 2 NAME			- Sugnide		
NAME			a	T ADDRESS				
STREET ADDRESS			4 4 CITY-S					
CITY-ST-ZIP		☐ DELETE	5 t TITLE	1-214		Change	Addition	
NAME			5.2 NAME	l				

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 suppliemental 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.

5 3 STREET ADDRESS

63 STREET ADDRESS

6 4 CITY - ST- ZIP

54 CITY-ST-ZIP

6 1 TITLE

62 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

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

☐ DELETE

\_\_\_ Change

Addition

**FILED** 

Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90138 017 \*\*\*150.00