**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # P98000013141

**NETYOU COMPUTER COMMUNICATION CORPORATION** 

Principal Place of Business

Mailing Address

## FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90004 005 \*\*\*158.75



201 CATTAIL CT ORLANDO FL 32806 ORLANDO FL 32806							
URLANDO FL 3	2800	ORLANDO FL 32000			DO NOT WRITE II	N THIS SPACE	
					3. Date Incorporated or Qualifed		
					02/09/1998		
2. Principal Pl	ace of Business o Old Winter Francen	2a. Mailing Address	Alinher	Garden	4. FEI Number 59-3490936		plied For t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.			PHILITO	V/ C/ CE/	5. Certifcate of Status Desired	\$8.75 A	dditional
22 Suite 45 27 Suite 45 City & State City & State City & State							·
23 Orlando, Fl 32811 28 Orlando			Florida		6: Election Campaign Financing Trust Fund Contribution	\$5:00 Added to	- 1
Zip Country Zip 24 3281 25 USA 29 3281			Country  30 USA		This corporation owes the current y     Personal Property Tax.	year Intangible ☐ Yes	ĽN0
24 520	9. Name and Address of Current	<u> </u>	30  5 - 2		10. Name and Address of New Regi	stered Agent	
	J. Harris and Address S. Carreix		81	Name	•		
Washburn, Kenneth R				Street Addre	ess (P.O. Box Number is Not Acceptable)	<u> </u>	
1153 MILL RUN CIRCLE				Street Addre	ss (F.O. Box Number is Not Acceptable)		
APO	PKA FL 32703		83				
			84	City		FL 85 Zip C	Code
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statu	ites, the abov	l e-named corpo	pration submits this statement for the purp	pose of changing its	registered
office or re	egistered agent, or both, in the State of in familiar with, and accept the obligatio	Florida, Such change was a	authorized by	the corporation	n's board of directors. I hereby accept th	e appointment as reç	gistered
•	it latitiliai with, and accept the obligation	113 01, 36011011 001.0000, 1 1	onda Otalaioa	•			}
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable. (NOT	E: Registered Agei	t signature required	when reinstating)	DATE	
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTO	RS IN 12
TITLE	D	☐ DELETE	1.1 TITLE			☐ Change	☐ Addition
NAME	HAZAN, SERGIO R		1.2 NAME				
STREET ADDRESS	201 CATTAIL CT		1.3 STREE	TADORESS			
CITY-ST-ZIP	ORLANDO FL 32806		1,4 CITY-S	T-ZIP		·	
TITLE	D	DELETE	2.1 TITLE			Change	Addition
NAME	BUDEISKY, ALDO R	·	2.2 NAME				1
STREET ADDRESS	201 CATTAIL CT		23 STREE	T ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32806		2. 4 CITY-5	T-21P			
TITLE		☐ DELETE	3.1 TITLE			Change	☐ Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREE	ADDRESS			
CITY-ST-ZIP			34 CITY-5	T-ZIP			
TITLE		☐ DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAME				1
STREET ADDRESS			4.3 STREE	ADDRESS			}
CITY-ST-ZIP			4.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	5.1 TITLE			Change	☐ Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	TADDRESS			-
CITY-ST-ZIP			5.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME				
STREET ADDRESS		, .	6.3 STREE	T ADDRESS			}
		, ,		I			,

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 truetee 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 oddress, with all other like empowered.

SIGNATURE: