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

PROFIT CORPORATION ANNUAL REPORT

**1999** 



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State

1000	
DOCUMENT #	P440000

1, Corporation Name

2. Principal Place of Business

Suite, Apt. #, etc.

ITextras, Inc.

Principa Place of Business Mailing Address

101 Ivy Lane Daytona Beach, FL

32114

2a. Mailing Address

Suite, Apt. #, etc.

101 Ivy Lane Daytona Beach, Florida 32114

## FILED May 17, 1999 8:00 am Secretary of State

05-17-1999 90089 011 \*\*\*150.00

DO NOT	WRITE	IM	THIS	SPACE

Applied For Not Applicable

\$8.75 Additional

Fee Required

3. Date incorporated or Qualifed 02/23/98

5. Certifcate of Status Desired

City & Stat	e	City & State				<ol><li>Election Campaign Financir</li></ol>	<sup>ng</sup> $\square$	\$5.00	May Be
23		28				Trust Fund Contribution		Added t	to Fees
Zìp	Country		Cönutı	у		8. This corporation owes the c	arrent year In		
24	25	29	30			Personal Property Tax.		Yes	N KIX
	9. Name and Address of Current F	tegistered Agent		-,		10. Name and Address of New	w Registered	Agent	
			8	1 Name					
ه ا	gat, M. Geoffrey		8	2 Street	Address	(P.O. Box Number is Not Acce	entable)		
	• •		-	- 00011		, ( · · 2 · 2 · · · · · · · · · · · · · ·	placity		
101 Ivy Lane Daytona Beach, FL 32114		8	3						
νa	ytona Beach, FL	32114		0.4					2-4-
			8-	City			FL	85 Zip C	_ode
office or r	to the provisions of Sections 607.0502 a egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida. Such change was a	authorized b	the corpo	corpora oration's	tion submits this statement for to board of directors, I hereby acc	he purpose of cept the appo	i changing its intment as reg	registered gistered
SIGNATORE	Signature, typed or printed name of registered agent ar	d title if applicable. (NOTE	. Registered Ag	nt signature re	equired wh		DATE		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO	OFFICERS A		
TITLE	President & CEO	☐ DELETE	1.1 TITLE					Change	☐ Addition
NAME	Legat, M. Geoffre	V	1.2 NAME	1					
STREET ADDRESS	101 Ivy Lane	У	1.3 STREI	TADDRESS					
CITY-ST-ZIP	Doutens Baseb FL	22114	1.4 CITY-	ST-ZIP					
TITLE	<del>Daytona Beach, F</del> L	3 Z I I T DELETE	2 1 TITLE			<del></del>		Change	☐ Addition
NAME			2.2 NAME						
STREET ADDRESS			2.3 STREI	T ADDRESS					
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP					
TITLE		☐ DELETE	3.1 TITLE			<del></del>		☐ Change	Addition .
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREE	T ADDRESS					-
CITY-ST-ZIP			34 CITY-	ST-ZIP					
TITLE		☐ DELETE	4.1 TITLE					Change	☐ Addition
NAME			4. 2 NAME	.					
STREET ADDRESS			4.3 STREE	TADDRESS					
CITY-ST-ZIP			4.4 CITY-	ST-ZIP					
TITLE		☐ DELETE	5.1 TITLE	_				☐ Change	Addition
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREE	T ADDRESS					•
CITY-ST-ZIP			5 4 CITY-	ST-ZIP					
TITLE		☐ DELETE	6.1 TITLE					Change	☐ Addition
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREE	TADDRESS					
			CA CITY I	T 710					1

**SIGNATURE** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

M. Geoffrey Legat

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 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.

President

4/29/99

904\*\*\*248\*\*2399

CR2E034 (11/98)