


FILED
Feb 22, 1999 8:00 am
Secretary of State

02-22-1999 90145 035 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P98000026677

1. Corporation Name

INTERNET MARKETING SOLUTIONS OF FLORIDA, INC.

Principal Place of Business
 16329 NORTHWEST 8TH DRIVE
 PEMBROKE PINES FL 33028

Mailing Address
 16329 NORTHWEST 8TH DRIVE
 PEMBROKE PINES FL 33028

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/20/1998

2. Principal Place of Business

21 10100 Griffin Road

Suite, Apt. #, etc.

22 Suite 101

City & State

23 Cooper City FL

Zip

24 33328

Country

25 USA

2a. Mailing Address

26

Suite, Apt. #, etc.

City & State

28

Zip

29

Country

30

4. FEI Number

65-0826169

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional Fee Required**6. Election Campaign Financing Trust Fund Contribution ☐**\$5.00 May Be Added to Fees**8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

BASS, CATHY S
16329 NORTHWEST 8TH DRIVE
PEMBROKE PINES FL 33028

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. 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

C Bass CEO

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/4/99

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
 NAME **CEO CATHY BASS**
 STREET ADDRESS **16329 NW 8th Drive**
 CITY-ST-ZIP **Pembroke Pines, FL 33028**

TITLE ☐ DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition
 1.2 NAME **CEO CATHY BASS**
 1.3 STREET ADDRESS **16329 NW 8th Dr.**
 1.4 CITY-ST-ZIP **Pembroke Pines, FL 33028**

2.1 TITLE ☐ Change ☒ Addition
 2.2 NAME **CFO Phil Cucci**
 2.3 STREET ADDRESS **7620 Marblehead Ct**
 2.4 CITY-ST-ZIP **Hickland, FL 33067**

3.1 TITLE ☐ Change ☐ Addition
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
 6.2 NAME
 6.3 STREET ADDRESS
 6.4 CITY-ST-ZIP

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.

SIGNATURE:

C Bass

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/4/99 959-252-911

Date

Daytime Phone #

CR2E034 (11/98)