1999

eCommerce Tools, Inc.



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000048075 1. Corporation Name

CHERRY*MILE*DEVELOPMENT CORPORATION**

Principal Place of Business							
277 ROYAL <mark>POINCIANA WA</mark> Y							

Mailing Address

277 ROYAL POINCIANA WAY

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90098 040 ***150.00



PALM BEACH FL 33480		PALM BEACH PL 33480		DO NOT WRITE IN THIS SPACE					
					3. Date Incorporated or Qualifed				
					05/20/1998				
	lace of Business	2a. Mailing Address			4. FEI Number	L	<u> </u>	ed For	
- '	oyal †Poinciana Way	26 265 Sunrise	Avenu	ıe	65-0842607	60.	 -	Applicable	
- Suite, Apt.		Suite, Apt. #, etc.		*	5. Certificate of Status Desired	•	r 3 Ad e Requ	ditional -	
22 Suite		27 Suite 204							
City & State	e _,	City & State			6. Election Campaign Financing		.00 м	• 1	
23 Palm	Beach, FL	28 Palm Beach,			Trust Fund Contribution		ded to	Fees	
Zip	Country	Zip	ຸ Country ¬		8. This corporation owes the current year Int	angible Yes	г]No	
24 33480	25 USA	29 33480 30	<u>us</u>	A	Personal Property Tax. 10. Name and Address of New Registered		-	1110	
	9. Name and Address of Current	Registered Agent	81	Name	10. Name and Address of New Registered	Agent			
LAIL IT	MIRE, DONALD F		"	Name					
			82	82 Street Address (P.O. Box Number is Not Acceptable)					
	265 SUNRISE AVENUE SUITE 204								
		•	83						
PALI	M BEACH FL 33480		84	City		85	Zip Co	de	
				,	<u> </u>	<u>. </u>			
office or re agent. I a	egistered agent, or both, in the State o m familiar with, and accept the obligati	it Florida. Such chande was alltr	IORIZEO DV	me corooran	poration submits this statement for the purpose of ion's board of directors. I hereby accept the appoi	ntment a	as regi	stered	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	gistered Age	nt signature requir	red when reinstating) DATE				
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AN				
TITLE	P,D	☐ DELETE	1.1 TITLE		,	☐ Ch	ange	Addition	
NAME	Scott Woynarski		1.2 NAME						
STREET ADDRESS	277 Royal Poinciana	Wav. #192	1.3 STREE	TADDRESS					
CITY-ST-ZIP	Palm Beach, FL 3348		1.4 CITY-S	ST-ZIP	•			_	
TITLE	CFO,D, T	☐ DELETE	2.1 TITLE			☐ Chi	ange	☐ Addition	
NAME	Paul Cooper		2.2 NAME	<i>*</i>					
STREET ADDRESS		Uo #102	2.3 STREE	T ADDRESS					
CITY-ST-ZIP		yai roinciana way wiya		ST-ZIP	والمعارض والمحارب المارات والمارات	7			
TITLE	Palm Beach, FL 3348	DELETE	3.1 TITLE			☐ Chi	inge	☐ Addition	
NAME		_	3.2 NAME	1	•			l	
STREET ADDRESS				T ADDRESS _					
CITY-ST-ZIP		والراويد عبد بالشراية المساوية	3.4. CITY-						
TITLE		☐ DELETE	4.1 TITLE			Ch	ange	Addition	
NAME	,	_	4. 2 NAME	. [•	
STREET ADDRESS				T ADDRESS					
			4.4 CITY-S						
CITY-ST-ZIP		[] DELETE	5.1 TITLE	J. 211		☐ Ch	ange	Addition	
	•		5.2 NAME			_			
NAME			I	T ADDRESS					
STREET ADDRESS			5.4 CITY-5					-	
CITY-ST-ZiP		☐ DELETE	6.1 TITLE			☐ Ch	ange	☐ Addition	
TITLE 3			6.2 NAME			_	•		
NAME ,	[``,			T ADDRESS					
STREET ADDRESS	- 集物 Yu Art	•	6.3 STREE						

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: