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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

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

	1999	,	DIVISION OF	00111	VALIDING	05 10 1000 00007 046	***1.50.00	
DOCL	JMENT # P980	000050052 🗸	K			05-10-1999 90267 046	***150.00	)
IN	NTERSERVE (IN	TERNET SI	ERVICES),	INC				
rincipal Pla	ace of Business	Maili	ng Address			-		
							5	
						DO NOT WRITE IN THIS	COACE	
						3. Date Incorporated or Qualifed	J-AGE	
						6/4/98		
Principal f	Place of Business	2a. M	lailing Address			4. FEI Number	A	plied For
800 B	enjamin Franklii	n Dr. 26 80	00 Benjamir	n Fra	nklin Dr.	65-0840809	<b>├</b> ─ <b>├</b> ─	t Applicable
Suite, Apt		27	uite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 Fee Re	Additional
City & State Sarasota, Florida 28						6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added	May Bê to Fees
Zip 34236	Country	Zi	•	Cou	•	8. This corporation owes the current year Int		man.
34430	9. Name and Address of		34236	30 I	JSA	Personal Property Tax.	Yes	X No
		<del>-</del> -		<u> </u>	81 Name	10. Name and Address of New Registered	Agent	
L. Norman Vaughan-Birch, Esq. c/o Kirk Pinkerton						ss (P.O. Box Number is Not Acceptable)		
	outh Orange Av			}	83			
Saraso	ota, Florida 342	36					_	
				i	84 City		85 Zip (	Code
						oration submits this statement for the purpose of on's board of directors. I hereby accept the appoint	changing its ntment as re	registered gistered
agent. I a	am familiar with, and accept the Stignature, typed or printed name of rec	he obligations of, Se	ection 607.0505, Flor	rida Statu		on's board of directors. Thereby accept the appoint	ntment as re	gistered
agent. I a	am familiar with, and accept the Signature, typed or printed name of reconstructions.	he obligations of, Se	oction 607.0505, Flor	rida Statu Registered	by the corporation tes.	on's board of directors. I hereby accept the appoi	ntment as re	gistered RS IN 12
agent. I a	Signature, typed or printed name of reg  OFFICION	he obligations of, Se	ection 607.0505, Flor	Registered /	Dy the corporation test.  Agent signature required	on's board of directors. Thereby accept the appoint	ntment as re	gistered
agent. I a	Signature, typed or printed name of regorder DPST Steve Doster	the obligations of, Se gistered agent and title if app CERS AND DIRECTO	olicable. (NOTE:  ORS  DELETE	Registered / 13.	Dy the corporation tes.  Agent signature required  E	on's board of directors. Thereby accept the appoint	ntment as re	gistered RS IN 12
agent. I a	Signature. typed or printed name of reg  OFFICE  D P S T  Steve Doster  800 Benjamin I	the state of Frontians, the obligations of, Se pistered agent and title if app CERS AND DIRECTO	olicable. (NOTE:  ORS  DELETE	Registered / 13. 1.1 T/TI 1.2 NAV	by the corporation less.  Agant signature required  E  E  E  E  E  E  E  E  E  E  E  E  E	on's board of directors. Thereby accept the appoint	ntment as re	gistered RS IN 12
agent. I a agent. I a agent. I a	Signature, typed or printed name of regorder DPST Steve Doster	the state of Frontians, the obligations of, Se pistered agent and title if app CERS AND DIRECTO	olicable. (NOTE:  ORS  DELETE	Registered / 13. 1.1 T/TI 1.2 NAV	by the corporation les.  Agant signature require  E  E  E  E  E  E  E  T  T  T  T  T  T	on's board of directors. Thereby accept the appoint	ID DIRECTO	RS IN 12
agent. I a gnature  gnature  energy  e	Signature. typed or printed name of reg  OFFICE  D P S T  Steve Doster  800 Benjamin I	the state of Frontians, the obligations of, Se pistered agent and title if app CERS AND DIRECTO	oction 607.0505, Flor ORS  DELETE	Registered / 13. 1.1 TITL 1.2 NA 1.3 STF	by the corporation tess.  Againt signature required tess.  E  KE  EET ADDRESS  '-ST-ZIP  E	on's board of directors. Thereby accept the appoint	ntment as re	gistered RS IN 12
agent. I a gnature  E E E E E E E E E T T T T T T T T T T	Signature. typed or printed name of recommendations. Signature. Typed or printed name of recommendations. OFFICE DPST Steve Doster 800 Benjamin F Sarasota, Flor	the state of Frontians, the obligations of, Se pistered agent and title if app CERS AND DIRECTO	oction 607.0505, Flor ORS  DELETE	Registered / 13. 1.1 TITL 1.2 NAM 1.3 STF 1.4 CITL 2.1 TITL 2.2 NAM	by the corporation tess.  Againt signature required tess.  E  KE  EET ADDRESS  '-ST-ZIP  E	on's board of directors. Thereby accept the appoint	ID DIRECTO	RS IN 12
agent. I a	Signature. typed or printed name of recommendations. Signature. Typed or printed name of recommendations. OFFICE DPST Steve Doster 800 Benjamin F Sarasota, Flor	the state of Frontians, the obligations of, Se pistered agent and title if app CERS AND DIRECTO	oction 607.0505, Flor ORS  DELETE	Registered / 13. 1.1 TM 1.2 NA 1.3 STR 1.4 CIT 2.1 TITL 2.2 NAA 2.3 STR	Dy the corporation tess.  Againt signature requires  E  KE  EET ADDRESS  '-ST-2IP  E  EE	on's board of directors. Thereby accept the appoint	ID DIRECTO	RS IN 12
agent. I a gnature  E E E E E E E E E E E E E E E E E E	Signature. typed or printed name of recommendations. Signature. Typed or printed name of recommendations. OFFICE DPST Steve Doster 800 Benjamin F Sarasota, Flor	the state of Frontians, the obligations of, Se pistered agent and title if app CERS AND DIRECTO	oction 607.0505, Flor ORS  DELETE	Registered / 13. 1.1 TM 1.2 NA 1.3 STR 1.4 CIT 2.1 TITL 2.2 NAA 2.3 STR	Dy the corporation less.  Agent signature requires  E  KE  E  EET ADDRESS  '-ST-ZIP  E  EET ADDRESS  /-ST-ZIP	on's board of directors. Thereby accept the appoint	ID DIRECTO	RS IN 12
agent. I a  GNATURE  E  E  E  E  ST-ZIP  E  ET ADDRESS  ST-ZIP	Signature. typed or printed name of recommendations. Signature. Typed or printed name of recommendations. OFFICE DPST Steve Doster 800 Benjamin F Sarasota, Flor	the state of Frontians, the obligations of, Se pistered agent and title if app CERS AND DIRECTO	oction 607.0505, Flor ORS DELETE DELETE	Registered / 13. 1.1 TM 1.2 NA 1.3 STF 1.4 CIT 2.1 TITL 2.2 NAA 2.3 STR 2.4 CIT	E EET ADDRESS  ST- ZIP  EET ADDRESS  ST-ZIP  EET ADDRESS	on's board of directors. Thereby accept the appoint	ID DIRECTO Change	RS IN 12 Addition
agent. I a gnature  E E E E E E E E E E E E E E E E E E	Signature, typed or printed name of recommendations of the OFFIC DPST Steve Doster 800 Benjamin F Sarasota, Flor	the state of Frontians, the obligations of, Se pistered agent and title if app CERS AND DIRECTO	oction 607.0505, Flor ORS DELETE DELETE	Registered / 13. 1.1 T/T 1.2 NAN 1.3 STF 1.4 CIP 2.1 TITL 2.2 NAN 2.3 STR 2.4 CIF 3.1 TITL 3.2 NAN	E EET ADDRESS  ST- ZIP  EET ADDRESS  ST-ZIP  EET ADDRESS	on's board of directors. Thereby accept the appoint	ID DIRECTO Change	RS IN 12 Addition
agent. I a gent.	Signature, typed or printed name of recommendations of the OFFIC DPST Steve Doster 800 Benjamin F Sarasota, Flor	the state of Frontians, the obligations of, Se pistered agent and title if app CERS AND DIRECTO	oction 607.0505, Flor ORS DELETE DELETE DELETE	Registered 13. 1.1 TIT 1.2 NAN 1.3 STF 1.4 CIP 2.1 TITL 2.2 NAA 2.3 STR 2.4 CIP 3.1 TITL 3.2 NAA 3.3 STR 3.4 CIP	Dy the corporation less.  In the corporation less.  In the corporation less.  In the corporation less is a constant less is a c	on's board of directors. Thereby accept the appoint	ID DIRECTO Change	RS IN 12 Addition
agent. I a gent.	Signature, typed or printed name of recommendations of the OFFIC DPST Steve Doster 800 Benjamin F Sarasota, Flor	the state of Frontians, the obligations of, Se pistered agent and title if app CERS AND DIRECTO	oction 607.0505, Flor ORS DELETE DELETE	Registered January 1.1 TITA 1.2 NAN 1.3 STF 1.4 CIP 2.1 TITA 2.2 NAN 2.3 STR 2.4 CIF 3.1 TITA 3.2 NAN 3.3 STR	Dy the corporation less.  In the corporation less.  In the corporation less.  In the corporation less is a constant less is a c	on's board of directors. Thereby accept the appoint	ID DIRECTO Change	RS IN 12 Addition Addition
agent. I a gnature  E E E E E E E E E E E E E E E E E E	Signature, typed or printed name of recording to the state of the stat	the state of Frontians, the obligations of, Se pistered agent and title if app CERS AND DIRECTO	oction 607.0505, Flor ORS DELETE DELETE DELETE	13.   1.1 T/T	Dy the corporation less.  Agent signature required les .  Agen	on's board of directors. Thereby accept the appoint	D DIRECTO Change Change	RS IN 12 Addition
agent. I a gent.	Signature, typed or printed name of recording to the state of the stat	the state of Frontians, the obligations of, Se pistered agent and title if app CERS AND DIRECTO	oction 607.0505, Flor ORS DELETE DELETE DELETE	13.   1.1 TM   1.2 NAM   1.3 STF   2.1 TM   2.2 NAM   2.3 STR   2.4 CM   3.1 TM   3.2 NAM   3.3 STF   3.4 CM   4.1 TM   4.2 NAM   4.3 STR   4.3	Dy the corporation less.  Agant signature required to the corporation less.  E	on's board of directors. Thereby accept the appoint	D DIRECTO Change Change	RS IN 12 Addition Addition
agent. I a gent.	Signature, typed or printed name of recording to the state of the stat	the state of Frontians, the obligations of, Se pistered agent and title if app CERS AND DIRECTO	ORS DELETE  DELETE  DELETE	13.   1.1 T/T	Dy the corporation less.  Agent signature required to the corporation less.  E	on's board of directors. Thereby accept the appoint	ID DIRECTO Change Change	RS IN 12 Addition Addition Addition
agent. I a gent.	Signature, typed or printed name of recording to the state of the stat	the state of Frontians, the obligations of, Se pistered agent and title if app CERS AND DIRECTO	oction 607.0505, Flor ORS DELETE DELETE DELETE	13.   1.1 T/T   1.2 NAM   1.3 STF   1.4 C/T   2.1 T/T   2.2 NAM   2.3 STR   2.4 C/T   3.1 T/T   3.2 NAM   3.3 STR   3.4 C/T   4.1 T/T   4.2 NAM   4.3 STR   4.4 C/T   5.1 T/T   5.1 T/T	Dy the corporation less.  Agent signature required to the corporation less.  E	on's board of directors. Thereby accept the appoint	D DIRECTO Change Change	RS IN 12 Addition Addition
agent. I a gnature  E E E EET ADDRESS -ST-ZIP  E ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP	Signature, typed or printed name of recording to the state of the stat	the state of Frontians, the obligations of, Se pistered agent and title if app CERS AND DIRECTO	ORS DELETE  DELETE  DELETE	Registered /   13.   1.1 TM   1.2 NAM   1.3 STF   1.4 CIP   2.1 TM   2.2 NAM   2.3 STR   2.4 CIT   3.1 TM   3.3 STF   3.4 CIP   4.1 TM   4.2 NAM   4.3 STR   4.4 CIP   5.1 TM   5.1 TM   5.2 NAM   5.1 TM   5.2 NAM   5.2 NAM   5.3 TM   6.3 TM   6.	Dy the corporation less.  Agent signature required to the corporation less.  E	on's board of directors. Thereby accept the appoint	ID DIRECTO Change Change	RS IN 12 Addition Addition Addition
agent. I a  CANATURE  E  EET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP	Signature, typed or printed name of recording to the state of the stat	the state of Frontians, the obligations of, Se pistered agent and title if app CERS AND DIRECTO	ORS DELETE  DELETE  DELETE	Registered /   13.   1.1 TM   1.2 NAM   1.3 STF   1.4 CIP   2.1 TM   2.2 NAM   2.3 STR   2.4 CIT   3.1 TM   3.3 STF   3.4 CIP   4.1 TM   4.2 NAM   4.3 STR   4.4 CIP   5.1 TM   5.1 TM   5.2 NAM   5.1 TM   5.2 NAM   5.2 NAM   5.3 TM   6.3 TM   6.	Dy the corporation less.  Agent signature required to the signature re	on's board of directors. Thereby accept the appoint	ID DIRECTO Change Change	RS IN 12  Addition  Addition
agent. I a gent.	Signature, typed or printed name of recording to the state of the stat	the state of Frontians, the obligations of, Se pistered agent and title if app CERS AND DIRECTO	ORS DELETE  DELETE  DELETE	Total   Proposition   Propos	Dy the corporation less.  Agent signature required less.  E	on's board of directors. Thereby accept the appoint	ID DIRECTO Change Change Change Change	RS IN 12 Addition Addition Addition Addition
E E E E E E E E E E E E E E E E E E E	Signature, typed or printed name of recording to the state of the stat	the state of Frontians, the obligations of, Se pistered agent and title if app CERS AND DIRECTO	Cition 607,0505, Flor Cition 607,0505, Flor CICION 607,0505, Flor CICION (NOTE: CICION	13.   1.1 TM   1.2 NAM   1.3 STF   1.4 CIP   2.1 TM   2.2 NAM   2.3 STR   2.4 CIT   3.1 TM   3.3 STF   4.4 CIP   4.2 NAM   4.3 STR   4.4 CIP   5.1 TM   5.1 TM   5.1 STR   5.4 CIP   5.1 STR   5.4 CIP   5.4 CIP   5.1 STR   5.4 CIP   5.4	Dy the corporation less.  Agent signature required less.  E	on's board of directors. Thereby accept the appoint	ID DIRECTO Change Change	RS IN 12 Addition Addition Addition Addition
agent. I a gent.	Signature, typed or printed name of recording to the state of the stat	the state of Frontians, the obligations of, Se pistered agent and title if app CERS AND DIRECTO	Cition 607,0505, Flor Cition 607,0505, Flor CICION 607,0505, Flor CICION (NOTE: CICION	Total   Proposition   Propos	Dy the corporation less.  Agent signature required less.  E	on's board of directors. Thereby accept the appoint	ID DIRECTO Change Change Change Change	RS IN 12 Addition Addition Addition

ta, I netery 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 of the receiver of trustee empowered to execute this report as required by Chapter 607. Florida Statutes: and that my name appears in Elock 12 or Elock 13 if changed, or on an attachment with an address, with all other like empowered.

CHEMATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE

Steve Doster

(941) 388-2903