

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

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

05-17-1999 90074 012 ***150.00

DOCUMENT # **P98 0000 52653** ✓

1. Corporation Name

WebCafe, Corp.

Principal Place of Business
1846 Harrison Street
Hollywood, FL 33020

Mailing Address
P.O. Box 4066
Hallandale, FL 33009

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

6.10.98

2. Principal Place of Business

21 1846 Harrison Street

Suite, Apt. #, etc.

2a. Mailing Address

26 P.O. Box 4066

Suite, Apt. #, etc.

4. FEI Number

65-0844786

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year intangible
Personal Property Tax.

☐ Yes

☐ No

22 City & State

23 Hollywood, Florida

24 33020

25 USA

27 City & State

28 Hallandale, Florida

29 33009

30 USA

9. Name and Address of Current Registered Agent

Darlene A. Elia
2755 E. Oakland Park Blvd.
Fort Lauderdale, FL 33306

10. Name and Address of New Registered Agent

81 Name

Rebecca J. DelMedico, ESQ.

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

14 Tara Lakes Drive East

83

84 City

Boynton Beach

FL

85 Zip Code
33436

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

05.28.99

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
President	Patricia M. Pereira	P.O. Box 4066	Hallandale, FL 33009		

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-30-99

CR2E034 (1/98)