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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

#### Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

# DOCUMENT # P98000053198

1. Corporation Name

WORLD GATE, INC.

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

05-10-1999 90241 032 \*\*\*150.00



Principal Place of Business Mailing Address						
119 OAK LEAF LANE 119 OAK LEAF LANE						
LONGWOOD FL	. 32779	LONGWOOD PL 3217	LONGWOOD FL 32779			DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualifed
						06/15/1998
2. Principal Pl	lace of Business	2a, Mailing Address	2a. Mailing Address			A FEI Number Applied For
21		26	26			59/3516479 Not Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			\$8.75 Additional
22	_	27	27			5. Certificate of Status Desired
City & State	9	City & State	City & State			6. Election Campaign Financing \$5.00 May Be
23						Trust Fund Contribution Added to Fees
Zip	Country	<b>⊢</b> `	Zip Cou		,	8. This corporation owes the current year Intangible  Personal Property Tax  Yes  No
24	25	29	30	30		Personal Property Tax. Yes XNo  10. Name and Address of New Registered Agent
	9. Name and Address of Curr	ent Registered Agent		81	Name	
KENI	NETH B. THOMSON, P.A.			L	Name	
101	SOUTHHALL LANE, SUITE 400	)		82	Street	t Address (P.O. Box Number is Not Acceptable)
	LAND FL 32751	•		83		
HICH	ENIE IE OEIO			03	1	
				84	City	FL 85 Zip Code
	4 - H	E02 and 607 1509 Elerida 9	tatutos the	abov	e pamed	
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE						
12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE		☐ DELE		1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition
NAME			1.21	NAME		7
STREET ADDRESS	1.3		STREE	TADDRESS	S Change	
CITY-ST-ZIP			CITY-S	ST-ZIP		
TITLE	☐ DELETE 2.1 TI		TITLE		☐ Change ☐ Addition	
NAME			2 2 N/			
STREET ADDRESS			238		TADDRESS	s
CITY-ST-ZiP					ST-ZIP —	
TITLE		☐ DEFE.	☐ DELETE 3.1 TH			☐ Change ☐ Addition
NAME			3.2 №			
STREET ADDRESS			1		TADDRESS	s
CITY-ST-ZIP		——————————————————————————————————————	3.4. CITY		ST-ZIP	Change C Addition
TITLE		∐ DELE	☐ DELETE 4.1 TI			☐ Change ☐ Addition
NAME				NAME		
STREET ADDRESS			4.3 ST		TADDRESS	
CITY-ST-ZIP					ST-ZIP	Dob.
TITLE			TITLE		Change Addition	
NAME			5.2 NAME			
STREET ADORESS			- 1		TADDRESS	S
CMY-ST-ZIP				CITY-S	ST-ZIP	
TITLE		☐ DELE	_	TITLE		☐ Change ☐ Addition
NAME				NAME		
STREET ADDRESS					TADDRESS	is
CITY-ST-ZIP	}		6.4	CITY-S	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:

537864-90241-32 Pag 000053148



### ATTACHMENT TO THE

### **PROFIT CORPORATION ANNUAL REPORT 1999**

President / Treasurer / Secretary:

Michel Thibault

119 Oak Leaf Lane

Longwood, FL 32779

Vice-President:

Nugzar Jangavadze 119 Oak Leaf Lane Longwood, FL 32779