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 # P98000056660

INTERNET RUSINESS SOLUTIONS CORPORATION

Principal Place	of Business	Mailing Addres	s	
3628 BLUEFIELD MELBOURNE FL		3628 BLUEFIELD MELBOURNE FL		
				3.
2. Principal Place of Business		2a. Mailing Add	Iress	4.
21		26		
Suite, Apt. #	t, etc.	Suite, Apt. 1	#, etc.	5.
City & State		City & State	6.	
23		28		
Zip	Country	Zip	Country	8.
		[:::]		i i
24	[25]	29	30	

Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90081 015 ***150.00



Principal Place	of Business	Ma	ailing Address]	: :==::=d (:0 :0:0: :0!!! 40 !!		Tilly Brits 3111	1881
3628 BLUEFIEL(MELBOURNE FL	28 BLUEFIELD AVE. ELBOURNE FL 32934					DQ NOT W	/RITE IN TH	IIS SPACE			
							Ī	3. Date Incorporated or Qualif	ed .		
								06/24/1998			
2. Principal Pl	ace of Business	2a.	Mailing Address			-		4. FEI Number		A	pplied For
21		26						59-3519277		N	ot Applicable
Suite, Apt. i	#, etc.		Suite, Apt. #, etc.			•		5. Certifcate of Status Desired		+	Additional
12		27						J. Definidate of Otatas Beamer		Fee R	equired
City & State	е		City & State					6. Election Campaign Financia	ng 🖂		May Be
23		28						Trust Fund Contribution			to Fees
Zip	Country	<u> </u>	Zip		intry			8. This corporation owes the c	urrent year		Miss
24	25	29		30	1			Personal Property Tax.	w Ponistor	Yes	MNo
	9. Name and Address of	or Current Regis	tered Agent		81	Name		10. Name and Address of Ne	w vahistete	u Ayett	
ENDI	iquez, Paul				"	ivanie					
	BLUEFIELD AVE.				82	Street A	Addres	s (P.O. Box Number is Not Acce	eptable)		
	BOURNE FL 32934				83					-	
WELL	DOD!!!\L L 02304				63			_			
					84	City		-		85 Zip	Code
		207.0500 1.0	07 4500 Florido Ctot	utan the e	h 0 / 0	named (nornore	ation cubmits this statement for	-		s registered.
11. Pursuant i	egistered agent, or both, in t	he State of Florid	da. Such change was	authorized	a by t	ne corpo	oration's	ation submits this statement for s board of directors. I hereby ac	cept the ap	Johnnen as i	egistered
										. a. 4.4€	
agent. I ar	m familiar with, and accept t	he obligations of,	, Section 607.0505, F	lorida Stat	utes.					6	3
agent. I ar SIGNATURE	PARTE	he obligations of,	, Section 607.0505, F	ionda Stat	utes.				DATE	क िं चि	7
agent. I ar	Signature, typed or printed name of re	he obligations of	f applicable. (NO	TE Registered	utes.			hen reinstating)	DATE	1 18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ORS IN 12
agent. I ar SIGNATURE 12.	Signature, typed or printed name of re	he obligations of,	, Section 607.0505, F If applicable. (NO: ECTORS	TE Registered	utes. 1 Agent	signature re	equired w	hen reinstating) ADDITIONS/CHANGES TO	OFFICERS	1 18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
agent. I ar SIGNATURE 12.	Signature, typed or printed name of re	he obligations of	f applicable. (NO	TE Registered 13.	Agent	signature re	equired w	hen reinstating) ADDITIONS/CHANGES TO	OFFICERS	AND DIRECT	ORS IN 12
agent. I ar SIGNATURE 12. TITLE NAME	Signature, typed or printed name of re OFFI PESSIDENT PAGE FIREGRE	gistered agent and title CERS AND DIRE	, Section 607.0505, F If applicable. (NO: ECTORS	TE: Registered 13. 1.1 Ti 1.2 No	Agent TLE AME	signature re	PA	ADDITIONS/CHANGES TO RESIDENT EARIGUET RUCELLU AMOUNT	OFFICERS	AND DIRECT	
agent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, typed or printed name of re OFFI PRESIDENT PADE FURIOUS 36V6 BLUEFICE	gistered agent and title CERS AND DIRE	, Section 607.0505, F If applicable. (NO: ECTORS	TE Registered 13. 1.1 TI 1.2 N 1.3 S	Agent TLE AME	signature re	PA	ADDITIONS/CHANGES TO RESIDENT EARIGUET RUCELLU AMOUNT	OFFICERS	AND DIRECT	
agent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY- ST- ZIP	Signature, typed or printed name of re OFFIE PRESIDENT PADE FIRE 1912 3678 BLUEFICE	gistered agent and title CERS AND DIRE	, Section 607.0505, F If applicable. (NO ECTORS DELETE	TE Registered 13. 1.1 TI 1.2 N 1.3 S 1.4 C	AME TREET	signature re	PA	hen reinstating) ADDITIONS/CHANGES TO	OFFICERS	AND DIRECT	
agent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of re OFFI PRESIDENT PADE FURIOUS 36V6 BLUEFICE	gistered agent and title CERS AND DIRE	, Section 607.0505, F If applicable. (NO: ECTORS	13. 1.1 Ti 1.2 N. 1.3 Si 1.4 Ci 2.1 Ti	Agent TLE AME TREET ITY-ST	signature re	PA	ADDITIONS/CHANGES TO RESIDENT EARIGUET RUCELLU AMOUNT	OFFICERS	AND DIRECTI	Addition
agent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of re OFFI PRESIDENT PADE FURIOUS 36V6 BLUEFICE	gistered agent and title CERS AND DIRE	, Section 607.0505, F If applicable. (NO ECTORS DELETE	TE Registered 13. 1.1 TI 1.2 N. 1.3 S' 1.4 C 2.1 TI 2.2 N.	TLE AME TREET. ITY-ST	signature re	PA	ADDITIONS/CHANGES TO RESIDENT EARIGUET RUCELLU AMOUNT	OFFICERS	AND DIRECTI	Addition
agent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of re OFFI PRESIDENT PADE FURIOUS 36V6 BLUEFICE	gistered agent and title CERS AND DIRE	, Section 607.0505, F If applicable. (NO ECTORS DELETE	TE Registered 13. 1.1 Ti 1.2 N 1.3 S 1.4 C 2.1 Ti 2.2 N 2.3 S	I Agent ITLE AME ITY-ST ITLE AME TREET	ADDRESS -ZIP ADDRESS	PA	ADDITIONS/CHANGES TO RESIDENT EARIGUET RUCELLU AMOUNT	OFFICERS	AND DIRECTI	Addition
agent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of re OFFI PRESIDENT PADE FURIOUS 36V6 BLUEFICE	gistered agent and title CERS AND DIRE	, Section 607.0505, Financial forms (NO ECTORS DELETE	TE Registerec 13. 1.1 TI 12 N 1.3 S 1.4 C 2.1 TI 2.2 N 2.3 S 2.4 C	I Agent I Agent ITLE AME ITY-ST ITLE AME TREET TREET CITY-SI	ADDRESS -ZIP ADDRESS	PA	ADDITIONS/CHANGES TO RESIDENT EARIGUET RUCELLU AMOUNT	OFFICERS	AND DIRECTI	Addition
agent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of re OFFI PRESIDENT PADE FURIOUS 36V6 BLUEFICE	gistered agent and title CERS AND DIRE	, Section 607.0505, F If applicable. (NO ECTORS DELETE	TE Registered 13. 1.1 TI 12 N. 1.3 S 1.4 C 2.1 TI 22 N. 2.3 S 2.4 C	I Agent ITLE AME ITY-ST ITLE AME TREET CITY-SI	ADDRESS -ZIP ADDRESS F-ZIP	PA	ADDITIONS/CHANGES TO RESIDENT EARIGUET RUCELLU AMOUNT	OFFICERS	AND DIRECTION Change	Addition
agent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	Signature, typed or printed name of re OFFI PRESIDENT PADE FURIOUS 36V6 BLUEFICE	gistered agent and title CERS AND DIRE	, Section 607.0505, Financial forms (NO ECTORS DELETE	TË Registerec 13. 1.1 Ti 1.2 N. 1.3 S 1.4 C 2.1 Ti 2.2 N. 2.3 S 2.4 C 3.1 Ti 3.2 N	J Agent J A	ADDRESS -ZIP ADDRESS 1. ZIP	PA	ADDITIONS/CHANGES TO RESIDENT EARIGUET RUCELLU AMOUNT	OFFICERS	AND DIRECTION Change	Addition
agent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	Signature, typed or printed name of re OFFI PRESIDENT PADE FURIOUS 36V6 BLUEFICE	gistered agent and title CERS AND DIRE	, Section 607.0505, Financial forms (NO ECTORS DELETE	TE Registered 13. 1.1 TI 1.2 N. 1.3 S' 1.4 C 2.1 TI 2.2 N. 2.3 S' 2.4 C 3.1 TI 3.2 N. 3.3 S'	I Agent ITLE AME ITY-ST ITLE AME TREET TREET AME TREET	ADDRESS -ZIP	PA	ADDITIONS/CHANGES TO RESIDENT EARIGUET RUCELLU AMOUNT	OFFICERS	AND DIRECTION Change	Addition
agent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of re OFFI PRESIDENT PADE FURIOUS 36V6 BLUEFICE	gistered agent and title CERS AND DIRE	Section 607.0505, F If applicable. (NO COTORS DELETE DELETE	TE Registerec 13. 1.1 TI 1.2 N. 1.3 S 1.4 C 2.1 TI 2.2 N. 2.3 S 2.4 C 3.1 TI 3.2 N. 3.3 S 3.4 C	JAGENT JA	ADDRESS -ZIP	PA	ADDITIONS/CHANGES TO RESIDENT EARIGUET RUCELLU AMOUNT	OFFICERS	AND DIRECTION Change	Addition
agent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of re OFFI PRESIDENT PADE FURIOUS 36V6 BLUEFICE	gistered agent and title CERS AND DIRE	, Section 607.0505, Financial forms (NO ECTORS DELETE	TE Registered 13. 1.1 TI 1.2 N. 1.3 S' 1.4 CC 2.1 TI 2.2 N. 2.3 S' 2.4 CC 3.1 TI 3.2 N. 3.3 S 3.4 CC 4.1 TI	J Agent ITLE AME ITVEET ITV-ST ITLE AME ITTEET ITLE ITTEET ITLE ITTEET ITTEET ITTEET ITTEET ITTEET	ADDRESS -ZIP	PA	ADDITIONS/CHANGES TO RESIDENT EARIGUET RUCELLU AMOUNT	OFFICERS	AND DIRECTI Change	Addition Addition
agent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME NAME NAME	Signature, typed or printed name of re OFFI PRESIDENT PADE FURIOUS 36V6 BLUEFICE	gistered agent and title CERS AND DIRE	Section 607.0505, F If applicable. (NO COTORS DELETE DELETE	TE Registered 13. 1.1 TI 1.2 N. 1.3 S' 1.4 CC 2.1 TI 2.2 N. 2.3 S' 2.4 CC 3.1 TI 3.2 N. 3.3 S' 4.4 CI 4.1 TI 4.2 N.	ITLE AME TITLE AME TITLE AME TREET TITLE AME TREET TITLE TREET TITLE TREET TREET TREET TREET TREET TREET TREET	ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP	PA	ADDITIONS/CHANGES TO RESIDENT EARIGUET RUCELLU AMOUNT	OFFICERS	AND DIRECTI Change	Addition Addition
agent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of re OFFI PRESIDENT PADE FURIOUS 36V6 BLUEFICE	gistered agent and title CERS AND DIRE	Section 607.0505, F If applicable. (NO COTORS DELETE DELETE	TE Registered 13. 1.1 TI 1.2 N. 1.3 S' 1.4 C 2.1 TI 2.2 N. 2.3 S' 2.4 C 3.1 TI 3.2 N. 3.3 S' 3.4 C 4.1 TI 4.2 N. 4.3 S'	JAGENTILE AME TREET TILE AME TREET	ADDRESS F-ZIP ADDRESS F-ZIP ADDRESS F-ZIP ADDRESS F-ZIP ADDRESS	PA	ADDITIONS/CHANGES TO RESIDENT EARIGUET RUCELLU AMOUNT	OFFICERS	AND DIRECTI Change	Addition Addition
agent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of re OFFI PRESIDENT PADE FURIOUS 36V6 BLUEFICE	gistered agent and title CERS AND DIRE	Section 607.0505, Find applicable. (NO ECTORS DELETE DELETE DELETE DELETE	TE Registered 13. 1.1 TI 12 N. 1.3 S' 1.4 C 2.1 TI 2.2 N. 2.3 S' 2.4 C 3.1 TI 3.2 N. 4.1 TI 4.2 N. 4.3 S 4.4 C	A Agent A Agent A Agent A Agent A AME TREET TITLE A AME TREET	ADDRESS F-ZIP ADDRESS F-ZIP ADDRESS F-ZIP ADDRESS F-ZIP ADDRESS	PA	ADDITIONS/CHANGES TO RESIDENT EARIGUET RUCELLU AMOUNT	OFFICERS	AND DIRECTI Change	Addition Addition
agent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME TITLE NAME TITLE	Signature, typed or printed name of re OFFI PRESIDENT PADE FIRE 012 36V6 BLUEFICE	gistered agent and title CERS AND DIRE	Section 607.0505, F If applicable. (NO COTORS DELETE DELETE	TE Registered 13. 1.1 TI 1.2 N. 1.3 S' 1.4 C 2.1 TI 2.2 N. 2.3 S' 2.4 C 3.1 TI 3.2 N. 3.3 S' 3.4 C 4.1 TI 4.2 N. 4.3 S'	INTE AME TREET TITLE AME TREET TITLE TREET	ADDRESS F-ZIP ADDRESS F-ZIP ADDRESS F-ZIP ADDRESS F-ZIP ADDRESS	PA	ADDITIONS/CHANGES TO RESIDENT EARIGUET RUCELLU AMOUNT	OFFICERS	AND DIRECT Change Change	Addition Addition
agent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of re OFFI PRESIDENT PADE FIRE 012 36V6 BLUEFICE	gistered agent and title CERS AND DIRE	Section 607.0505, Find applicable. (NO ECTORS DELETE DELETE DELETE DELETE	TE Registered 13. 1.1 TI 12 N. 1.3 S' 14 C 2.1 TI 2.2 N. 2.3 S' 2.4 C 3.1 TI 4.2 N. 4.3 S 4.4 C 5.1 TI 5.2 N.	ITLE AME TREET TITLE AME TREET TITLE AME TREET TREET TREET TITLE TREET TREET TITLE TREET T	ADDRESS F-ZIP ADDRESS F-ZIP ADDRESS F-ZIP ADDRESS F-ZIP ADDRESS	PA	ADDITIONS/CHANGES TO RESIDENT EARIGUET RUCELLU AMOUNT	OFFICERS	AND DIRECT Change Change	Addition Addition
agent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of re OFFI PRESIDENT PADE FIRE 012 36V6 BLUEFICE	gistered agent and title CERS AND DIRE	Section 607.0505, Find applicable. (NO ECTORS DELETE DELETE DELETE DELETE	TE Registered 13. 1.1 TI 12 N. 1.3 S' 1.4 C 2.1 TI 2.2 N. 2.3 S' 2.4 C 3.1 TI 4.2 N. 4.3 S' 4.4 C 5.1 TI 5.2 N. 5.3 S' 5.4 S' 5.5 S' 5.	Appending Append	ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP	PA	ADDITIONS/CHANGES TO RESIDENT EARIGUET RUCELLU AMOUNT	OFFICERS	AND DIRECT Change Change	Addition Addition
agent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of re OFFI PRESIDENT PADE FIRE 012 36V6 BLUEFICE	gistered agent and title CERS AND DIRE	Section 607.0505, F If applicable. (NO ECTORS DELETE DELETE DELETE DELETE	TE Registered 13. 1.1 TI 12 N. 1.3 S' 1.4 C 2.1 TI 2.2 N. 2.3 S' 2.4 C 3.1 TI 4.2 N. 4.3 S' 4.4 C 5.1 TI 5.2 N. 5.3 S' 5.4 S' 5.5 S' 5.	ITLE AME TREET TITLE AME TREET TITLE AME TREET TITLE TREET TITLE TREET TITLE TREET TITLE T	ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP	PA	ADDITIONS/CHANGES TO RESIDENT EARIGUET RUCELLU AMOUNT	OFFICERS	AND DIRECT Change Change	Addition Addition
agent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of re OFFI PRESIDENT PADE FIRE 012 36V6 BLUEFICE	gistered agent and title CERS AND DIRE	Section 607.0505, Find applicable. (NO ECTORS DELETE DELETE DELETE DELETE	TE Registered 13. 1.1 TI 12 N. 1.3 S' 1.4 C 2.1 TI 2.2 N. 2.3 S' 2.4 C 3.1 TI 4.2 N. 4.3 S' 4.4 TI 4.2 N. 4.3 S' 4.4 C 5.1 TI 5.2 N. 5.3 S' 5.4 C	ITLE AME TREET TITLE AME TREET TITLE AME TREET TITLE TREET TITLE TREET TREET TITLE TREET TITLE TREET TITLE TREET TITLE	ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP	PA	ADDITIONS/CHANGES TO RESIDENT EARIGUET RUCELLU AMOUNT	OFFICERS	AND DIRECT Change Change Change	Addition Addition Addition

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 or an attachment with an address, with all other like empowered.

SIGNATURE:

NO TYPED OR PRODED NAME OF SIGNING OFFICER OR DIRECTOR