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 # P98000059137

WEBQUEST DESIGNERS, INC.

FILED May 04, 1999 8:00 am Secretary of State

05-04-1999 90028 048 ***150.00



	•							JULI EMIL (DIA	# #00		
Principal Place of Business Mailing Address											
7378 W. ATLANTIC BLVD SUITE 211 7378 W. ATLANTIC MARGATE FL 33063 MARGATE FL 33063			'8 W. atlantic blvd Rgate fl 33063	D SUITE 211							
			•				DO NOT WRITE IN THIS SPACE				
							3. Date Incorporated or Qualifed				
							07/02/1998				
2. Principal Place of Business			2a. Mailing Address				4. FEI Number	CE 0050100			
21			26				65-0853102		Not Applicable		
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 A				
22			7						ee Req	· ····	-
City & State			City & State				6. Election Campaign Financing	•		∕lay Be	
23			28				Trust Fund Contribution Added to Fees				
Zip Country			Žip Cou				8. This corporation owes the current year			ا ا	
24	25	29]					Personal Property Tax. XI Yes No				i
	9. Name and Address	of Current Regis	tered Agent		81	N	10. Name and Address of New Registe	rea Agent			ľ
PDU	NO WONE				٥١	Name					
BRUNO, YVONNE						Street Address (P.O. Box Number is Not Acceptable)					
5400 SW 12TH ST., D-210 N. LAUDERDALE FL 33068											
N. L	AUDERDALE FL 33000	-	-		83		•				
					84	City	· · · · · ·	85	Zip C	ode	
-	•					•					ł
office or r	to the provisions of Section registered agent, or both, in im familiar with, and accept	the State of Floric	ia. Such change was a	authorized	DV f	-named corpo he corporation	oration submits this statement for the purpos n's board of directors. I hereby accept the a	e of changi ppointment	ng its r as reg	egistered istered	
SIGNATURE					•		when reinstating) DAT			_ [ـ ا
Signature, typed or printed name of registered agent and title if applicable. 12. OFFICERS AND DIRECTORS				E: Registered Agent signature requir		signature required	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	PS			_	TITLE				ange	Addition	7
	BRUNO, YVONNE M								-	_	1 3
NAME			1.2 NAME		*DDDEEC					١	
STREET ADDRESS			211		1.3 STREET ADDRESS 1.4 CITY-ST-ZIP						}
CITY-ST-ZIP	MARGATE FL 33063		☐ DELETE	2.1 TITL		-212		Ch	ange	Addition	(
TITLE			- Derrie	1						·	
NAME				2.2 NAME						i	
STREET ADDRESS		* -			2.3 STREET ADDRESS		ير م سجي			}	ļ
CITY-ST-ZIP			☐ DELETE		3.1 TITLE				ange -	Addition	· ·
TITLE			□ perete			1		L. 0	- 3-		i
NAME					.2 NAME .3 STREET ADDRESS						l
STREET ADDRESS											Ì
CITY-ST-ZIP		 	DELETE	3.4. CI 4.1 TI		- ZIP		[] Ch	ange	Addition	
TITLE								٠,٠٠٠			ĺ
NAME				4. 2 N							ĺ
STREET ADDRESS						ADORESS				ļ	
CITY-ST-ZIP	3P		□ prict*	4.4 C		-ZIP		[] Ch	anne	Addition	Ė
TITLE	!		☐ DELETE	5.1 TITLE 5.2 NAME				L. 7011	unge		ì
NAME.						*DODECC				{	ł
STREET ADDRESS						ADDRESS					l
CITY-ST-ZIP					TY-ST-	-ZIP		[] Ch	2000	Addition	1
TITLE	٠.		☐ DELETE	6.1 TI				டுப	anye	□ vaainou	i
NAME	Ì			6.2 NA						ł	
STREET ADDRESS				6.3 ST	REET	ADDRESS					1

64 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 pa an attachment with an address, with all other like empowered.

SIGNATURE STAND OF PRINTED OF SIGNING OFFICER OR DIRECTOR

4/28/99 954.917-6843

CR2E034 (11/98)