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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DO NOT WRITE IN THIS SPACE

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P98000084247			
1. Corporation Name IVOLO, INC. 101 SECOND PLACE SUITE 116 CANESVILLE FL 32601			
Principal Place of Business 101 SE 2ND PLACE, SUITE 116 CANESVILLE, FL 32601		Mailing Address SAME	
2. Principal Place of Business		2a. Mailing Address	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	3. Date Incorporated or Qualified 9/30/98	
22 City & State	27 City & State	4. FEI Number 59-3533990	
23 Zip	28 Zip	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
24 Country	29 Country	6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
25		7. This corporation owes the current year intangible Personal Property Tax. ☐ Yes ☐ No	
8. Name and Address of Current Registered Agent FINANCIAL FOUNDATIONS INC. 7800 113TH STREET NO #203 SEMINOLE FLORIDA 33772		10. Name and Address of New Registered Agent	
11. Pursuant to the provisions of Sections 807.0602 and 807.1808, 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 807.0608, Florida Statutes.		12. OFFICERS AND DIRECTORS	
SIGNATURE Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when re-filing)		DATE	
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
1.1 TITLE	1.2 NAME	2.1 TITLE	2.2 NAME
STREET ADDRESS	STREET ADDRESS	3.1 TITLE	3.2 NAME
CITY-ST-ZIP	CITY-ST-ZIP	4.1 TITLE	4.2 NAME
TITLE	NAME	5.1 TITLE	5.2 NAME
STREET ADDRESS	STREET ADDRESS	6.1 TITLE	6.2 NAME
CITY-ST-ZIP	CITY-ST-ZIP	7.1 TITLE	7.2 NAME
TITLE	NAME	8.1 TITLE	8.2 NAME
STREET ADDRESS	STREET ADDRESS	9.1 TITLE	9.2 NAME
CITY-ST-ZIP	CITY-ST-ZIP	10.1 TITLE	10.2 NAME
TITLE	NAME	11.1 TITLE	11.2 NAME
STREET ADDRESS	STREET ADDRESS	12.1 TITLE	12.2 NAME
CITY-ST-ZIP	CITY-ST-ZIP	13.1 TITLE	13.2 NAME
TITLE	NAME	14.1 TITLE	14.2 NAME
STREET ADDRESS	STREET ADDRESS	15.1 TITLE	15.2 NAME
CITY-ST-ZIP	CITY-ST-ZIP	16.1 TITLE	16.2 NAME
TITLE	NAME	17.1 TITLE	17.2 NAME
STREET ADDRESS	STREET ADDRESS	18.1 TITLE	18.2 NAME
CITY-ST-ZIP	CITY-ST-ZIP	19.1 TITLE	19.2 NAME
TITLE	NAME	20.1 TITLE	20.2 NAME
STREET ADDRESS	STREET ADDRESS	21.1 TITLE	21.2 NAME
CITY-ST-ZIP	CITY-ST-ZIP	22.1 TITLE	22.2 NAME
TITLE	NAME	23.1 TITLE	23.2 NAME
STREET ADDRESS	STREET ADDRESS	24.1 TITLE	24.2 NAME
CITY-ST-ZIP	CITY-ST-ZIP	25.1 TITLE	25.2 NAME
TITLE	NAME	26.1 TITLE	26.2 NAME
STREET ADDRESS	STREET ADDRESS	27.1 TITLE	27.2 NAME
CITY-ST-ZIP	CITY-ST-ZIP	28.1 TITLE	28.2 NAME
TITLE	NAME	29.1 TITLE	29.2 NAME
STREET ADDRESS	STREET ADDRESS	30.1 TITLE	30.2 NAME
CITY-ST-ZIP	CITY-ST-ZIP	31.1 TITLE	31.2 NAME
TITLE	NAME	32.1 TITLE	32.2 NAME
STREET ADDRESS	STREET ADDRESS	33.1 TITLE	33.2 NAME
CITY-ST-ZIP	CITY-ST-ZIP	34.1 TITLE	34.2 NAME
TITLE	NAME	35.1 TITLE	35.2 NAME
STREET ADDRESS	STREET ADDRESS	36.1 TITLE	36.2 NAME
CITY-ST-ZIP	CITY-ST-ZIP	37.1 TITLE	37.2 NAME
TITLE	NAME	38.1 TITLE	38.2 NAME
STREET ADDRESS	STREET ADDRESS	39.1 TITLE	39.2 NAME
CITY-ST-ZIP	CITY-ST-ZIP	40.1 TITLE	40.2 NAME
TITLE	NAME	41.1 TITLE	41.2 NAME
STREET ADDRESS	STREET ADDRESS	42.1 TITLE	42.2 NAME
CITY-ST-ZIP	CITY-ST-ZIP	43.1 TITLE	43.2 NAME
TITLE	NAME	44.1 TITLE	44.2 NAME
STREET ADDRESS	STREET ADDRESS	45.1 TITLE	45.2 NAME
CITY-ST-ZIP	CITY-ST-ZIP	46.1 TITLE	46.2 NAME
TITLE	NAME	47.1 TITLE	47.2 NAME
STREET ADDRESS	STREET ADDRESS	48.1 TITLE	48.2 NAME
CITY-ST-ZIP	CITY-ST-ZIP	49.1 TITLE	49.2 NAME
TITLE	NAME	50.1 TITLE	50.2 NAME
STREET ADDRESS	STREET ADDRESS	51.1 TITLE	51.2 NAME
CITY-ST-ZIP	CITY-ST-ZIP	52.1 TITLE	52.2 NAME
TITLE	NAME	53.1 TITLE	53.2 NAME
STREET ADDRESS	STREET ADDRESS	54.1 TITLE	54.2 NAME
CITY-ST-ZIP	CITY-ST-ZIP	55.1 TITLE	55.2 NAME
TITLE	NAME	56.1 TITLE	56.2 NAME
STREET ADDRESS	STREET ADDRESS	57.1 TITLE	57.2 NAME
CITY-ST-ZIP	CITY-ST-ZIP	58.1 TITLE	58.2 NAME
TITLE	NAME	59.1 TITLE	59.2 NAME
STREET ADDRESS	STREET ADDRESS	60.1 TITLE	60.2 NAME
CITY-ST-ZIP	CITY-ST-ZIP	61.1 TITLE	61.2 NAME
TITLE	NAME	62.1 TITLE	62.2 NAME
STREET ADDRESS	STREET ADDRESS	63.1 TITLE	63.2 NAME
CITY-ST-ZIP	CITY-ST-ZIP	64.1 TITLE	64.2 NAME
TITLE	NAME	65.1 TITLE	65.2 NAME
STREET ADDRESS	STREET ADDRESS	66.1 TITLE	66.2 NAME
CITY-ST-ZIP	CITY-ST-ZIP	67.1 TITLE	67.2 NAME
TITLE	NAME	68.1 TITLE	68.2 NAME
STREET ADDRESS	STREET ADDRESS	69.1 TITLE	69.2 NAME
CITY-ST-ZIP	CITY-ST-ZIP	70.1 TITLE	70.2 NAME
TITLE	NAME	71.1 TITLE	71.2 NAME
STREET ADDRESS	STREET ADDRESS	72.1 TITLE	72.2 NAME
CITY-ST-ZIP	CITY-ST-ZIP	73.1 TITLE	73.2 NAME
TITLE	NAME	74.1 TITLE	74.2 NAME
STREET ADDRESS	STREET ADDRESS	75.1 TITLE	75.2 NAME
CITY-ST-ZIP	CITY-ST-ZIP	76.1 TITLE	76.2 NAME
TITLE	NAME	77.1 TITLE	77.2 NAME
STREET ADDRESS	STREET ADDRESS	78.1 TITLE	78.2 NAME
CITY-ST-ZIP	CITY-ST-ZIP	79.1 TITLE	79.2 NAME
TITLE	NAME	80.1 TITLE	80.2 NAME
STREET ADDRESS	STREET ADDRESS	81.1 TITLE	81.2 NAME
CITY-ST-ZIP	CITY-ST-ZIP	82.1 TITLE	82.2 NAME
TITLE	NAME	83.1 TITLE	83.2 NAME
STREET ADDRESS	STREET ADDRESS	84.1 TITLE	84.2 NAME
CITY-ST-ZIP	CITY-ST-ZIP	85.1 TITLE	85.2 NAME
TITLE	NAME	86.1 TITLE	86.2 NAME
STREET ADDRESS	STREET ADDRESS	87.1 TITLE	87.2 NAME
CITY-ST-ZIP	CITY-ST-ZIP	88.1 TITLE	88.2 NAME
TITLE	NAME	89.1 TITLE	89.2 NAME
STREET ADDRESS	STREET ADDRESS	90.1 TITLE	90.2 NAME
CITY-ST-ZIP	CITY-ST-ZIP	91.1 TITLE	91.2 NAME
TITLE	NAME	92.1 TITLE	92.2 NAME
STREET ADDRESS	STREET ADDRESS	93.1 TITLE	93.2 NAME
CITY-ST-ZIP	CITY-ST-ZIP	94.1 TITLE	94.2 NAME
TITLE	NAME	95.1 TITLE	95.2 NAME
STREET ADDRESS	STREET ADDRESS	96.1 TITLE	96.2 NAME
CITY-ST-ZIP	CITY-ST-ZIP	97.1 TITLE	97.2 NAME
TITLE	NAME	98.1 TITLE	98.2 NAME
STREET ADDRESS	STREET ADDRESS	99.1 TITLE	99.2 NAME
CITY-ST-ZIP	CITY-ST-ZIP	100.1 TITLE	100.2 NAME

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 807, 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 the empowered.

SIGNATURE: ALBERTO FICHERA

9/13/99

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