2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 22, 2000 8:00 am
Secretary of State
06-22-2000 90049 042 ***558.75

DOCUMENT # P99000005576

1. Entity Name
Internet Strategies, Inc.

Principal Place of Business
9858 Glades Road
Suite 2000
Boca Raton, FL 33434

Mailing Address
SAME

00065609

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
9858 Glades Road	SAME
Suite, Apt. #, etc.: Suite 2000	Suite, Apt. #, etc.
City & State: Boca Raton, FL	City & State
Zip: 33432 Country: US	Zip Country

4. FEI Number — X Applied For / Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
Ryan Rubenstein	Name: Joshua G. Gerstin, Esq.
9858 Glades Road	Street Address (P.O. Box Number is Not Acceptable): 1515 N. Federal Highway
Suite 2000	Suite 300
Boca Raton, FL 33432	City: Boca Raton FL Zip Code: 33432

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE [signature] 5/23/00
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Ryan Rubenstein 9858 Glades Road, Ste 2000 ~~Boca Raton, FL 33434~~ ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President, Secretary, Treas. Patricia Conte 9858 Glades Road, Suite 2000 Boca Raton, FL 33434 ☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E031 (9/99)

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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Patricia Conte 6-15-00 (561) 750-3456
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #