

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2003 8:00 am
Secretary of State

04-24-2003 90128 034 ***150.00

DOCUMENT # P99000101267

1. Entity Name
KW INTERNET SERVICES, INC.



Principal Place of Business

~~2300 N DIXIE HWY STE 201~~
~~BOCA RATON FL 33491~~

Mailing Address

~~2300 N DIXIE HWY STE 201~~
~~BOCA RATON FL 33491~~

11011010



2. Principal Place of Business

5499 N Federal Hwy
Suite, Apt. #, etc.
Ste I

3. Mailing Address

5499 N Federal Hwy
Suite, Apt. #, etc.
Ste I

☒ CHECK HERE IF MAKING CHANGES

City & State
Boca Raton FL

City & State
Boca Raton FL

4. FEI Number **65-0990570**

Applied For
Not Applicable

Zip
33487

Country
USA

Zip
33487

Country
USA

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

WOOD, KEITH A
~~3700 NW 102 AVE~~
CORAL SPRINGS FL 33065

Name
Street Address (P.O. Box Number is Not Acceptable)
5499 N Federal Hwy
Ste I
City **Boca Raton** **FL** Zip Code **33487**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **WOOD, KEITH**
STREET ADDRESS ~~3700 NW 102ND AVE~~
CITY-ST-ZIP **CORAL SPRINGS FL 33065**

TITLE **P** ☒ Change ☐ Addition
NAME **Wood Keith A**
STREET ADDRESS **5499 N Federal Hwy Ste I**
CITY-ST-ZIP **Boca Raton FL 33487**

TITLE **T** ☒ Delete
NAME **MERTER, MICHAEL**
STREET ADDRESS **74 W COCONUT DRIVE**
CITY-ST-ZIP **LAKE WORTH FL 33467**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/03 Date

561-750-5499 Daytime Phone #

CR2E034 (10/02)