

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F94000004155 (7)

1. Corporation Name
MEDINET, INC.



Principal Place of Business: 8121 10TH AVE N. GOLDEN VALLEY MN 55427
Mailing Address: 8121 10TH AVE N. GOLDEN VALLEY MN 55427

3. Date Incorporated or Qualified: 08/10/1994
3a. Date of Last Report: 05/01/1995
4. FEI Number: 41-1726114
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country 25
2a. Mailing Address: 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30

9. Name and Address of Current Registered Agent
CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD
PLANTATION FL 33324

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when re-registering) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	OB	<input type="checkbox"/> DELETE
NAME	PULIDO, MARK A.	
STREET ADDRESS	8121 10TH AVE N.	
CITY-ST-ZIP	GOLDEN VALLEY MN 55427	
TITLE	V	<input type="checkbox"/> DELETE
NAME	BRADY, CARL R.	
STREET ADDRESS	8121 10TH AVE N.	
CITY-ST-ZIP	GOLDEN VALLEY MN 55427	
TITLE	V	<input type="checkbox"/> DELETE
NAME	PAWLAK, TIMOTHY W	
STREET ADDRESS	8121 10TH AVE N.	
CITY-ST-ZIP	GOLDEN VALLEY MN 55427	
TITLE	VT	<input type="checkbox"/> DELETE
NAME	CARR, ROBERT G.	
STREET ADDRESS	8121 10TH AVE N.	
CITY-ST-ZIP	GOLDEN VALLEY MN 55427	
TITLE	D	<input type="checkbox"/> DELETE
NAME	PYOTT, DAVID E.I.	
STREET ADDRESS	8121 10TH AVE N.	
CITY-ST-ZIP	GOLDEN VALLEY MN 55427	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DCP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	CARR, ROBERT G.	
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	VJ	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	LANCE, JEAN F.	
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	GAPPA, JOHN A.	
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS	LICH STRASSE 35, CH 4002	
5.4 CITY-ST-ZIP	BASEL, SWITZERLAND	
6.1 TITLE	S (Assistant)	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	THOMPSON, JAMES E.	
6.3 STREET ADDRESS	8121 10TH AVENUE NORTH	
6.4 CITY-ST-ZIP	GOLDEN VALLEY, MN 55427	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 on an attachment with an address.

SIGNATURE: James E. Thompson Assistant Secretary Date: 4/30/96 (612) 595-6000

CR2E034 (12/95)