

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 27 AM 10:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **K21185** (9)

1. Corporation Name
NETWORKS-U.S.A. XII, INCORPORATED

Principal Place of Business Mailing Address
% JEROME FELDMAN **% JEROME FELDMAN**
P.O. BOX 610096 **P.O. BOX 610096**
N MIAMI FL 33261-7096 **N MIAMI FL 33261-7096**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **04/18/1988** 3a. Date of Last Report **04/22/1994**

2. Principal Place of Business 2a. Mailing Address
21 **800 Brickell Ave.** 26 **800 Brickell Ave.**
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 **605** 27 **605**
City & State City & State
23 **Miami, Florida** 28 **Miami, Florida**
Zip Country Zip Country
24 **33131** 25 **USA** 29 **33131** 30 **USA**

4. FEI Number **65-0049431** Applied For
Not Applicable

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

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

7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

FELDMAN, JEROME
11900 BISCAYNE BOULEVARD
PENTHOUSE 800
NORTH MIAMI FL 33181

10. Name and Address of New Registered Agent

B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable) **800 Brickell Avenue**
B3 **Suite 605**
B4 City **Miami** B5 Zip Code **FL 33131**

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

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

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DP
NAME	FELDMAN, JEROME
STREET ADDRESS	11900 BISCAYNE BLVD. #800
CITY-ST-ZIP	NORTH MIAMI FL
TITLE	T
NAME	FELDMAN, MICHAEL
STREET ADDRESS	11900 BISCAYNE BLVD., #800
CITY-ST-ZIP	NORTH MIAMI FL
TITLE	S
NAME	FELDMAN, JASON
STREET ADDRESS	11900 BISCAYNE BLVD., #800
CITY-ST-ZIP	NORTH MIAMI FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	800 Brickell Avenue, Ste. 605
13 STREET ADDRESS	Miami, Florida 33131
14 CITY-ST-ZIP	
21 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	800 Brickell Avenue, Ste. 605
23 STREET ADDRESS	Miami, Florida 33131
24 CITY-ST-ZIP	
31 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	800 Brickell Avenue, Ste. 605
33 STREET ADDRESS	Miami, Florida 33131
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

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)(b), 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: *Jerome Feldman* **Jerome Feldman** 4-21-95 305 530 08 04