

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAR 29 AM 9:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000004421 (1)**

1. Corporation Name

NETWORK AUDITING SERVICES, INC.

Principal Place of Business

Mailing Address

~~8623 N.W. 36 ST.~~ **210 UNIVERSITY DR**
~~SUITE 104~~ **SUITE 502**
~~SUNRISE FL 33351~~ **CORAL SPRINGS, FL**
33071

~~8623 N.W. 36 ST.~~
~~SUITE 104~~
~~SUNRISE FL 33351~~

NETWORK AUDITING SERVICES INC.
BOX 77-0430
CORAL SPRINGS, FL 33077-0430

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21		26		01/10/1994	01/10/1994
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEJ Number	Applied For
22		27		65-0461394	Not Applicable
City & State		City & State		5. Certificate of Status Desired	\$8.75 Additional Fee Required
23		28		<input type="checkbox"/>	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	6. Election Campaign Financing Trust Fund Contribution	
24	25	29	30	<input type="checkbox"/>	
		33077		8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes	
				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
GREENBERG, PHILIP M 8623 N.W. 36TH ST. SUITE 104 SUNRISE FL 33351				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				210 UNIVERSITY DR			
				83			
				SUITE 502			
				84 City			
				CORAL SPRINGS			
				FL		85 Zip Code	
						33071	

11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above named corporation submits the 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 I accept the obligations of, Section 607 0505, Florida Statutes.

SIGNATURE: DATE: _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	DP	1. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	GREENBERG, PHILIP M	1.2 NAME					
STREET ADDRESS	8623 N.W. 36 ST, STE 104	1.3 STREET ADDRESS					
CITY, ST, ZIP	SUNRISE FL 33351	1.4 CITY, ST, ZIP					
TITLE	ST	2.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	GREENBERG, LIBBY	2.2 NAME		- RESIGNED -			
STREET ADDRESS	8623 N.W. 36 ST, STE 104	2.3 STREET ADDRESS					
CITY, ST, ZIP	SUNRISE FL 33351	2.4 CITY, ST, ZIP					
TITLE	SECRETARY	3.1 TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
NAME	ARNOLD LOWELL	3.2 NAME					
STREET ADDRESS	210 UNIVERSITY DR SUITE 502	3.3 STREET ADDRESS					
CITY, ST, ZIP	CORAL SPRINGS, FL 33071	3.4 CITY, ST, ZIP					
TITLE		4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME		4.2 NAME					
STREET ADDRESS		4.3 STREET ADDRESS					
CITY, ST, ZIP		4.4 CITY, ST, ZIP					
TITLE		5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME		5.2 NAME					
STREET ADDRESS		5.3 STREET ADDRESS					
CITY, ST, ZIP		5.4 CITY, ST, ZIP					
TITLE		6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME		6.2 NAME					
STREET ADDRESS		6.3 STREET ADDRESS					
CITY, ST, ZIP		6.4 CITY, ST, ZIP					

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(4)(b), Florida Statutes. I further certify that the information included 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, or on an attachment with an address.

SIGNATURE: DATE: 3/4/95
PHILIP GREENBERG
305-340-0510