FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9500000307 (5)

REALNET INTERNATIONAL, INC.

Principal Place of Business Mailing Address 27 VIA DE LUNA DRIVE 27 VIA DE LUNA DRIVE PENSACOLA FL 32561 PENSACOLA FL 32561-2003 3. Date Incorporated or Qualified 3a. Date of Last Report 06/19/1996 01/01/1995 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 59-3297829 Not Applicable 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be **Trust Fund Contribution** Added to Fees 28 23 Country 8. This corporation has liability for intangible tax under s. 199.032, Yes X No 30 Florida Statutes 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name RUSSO, MICHAEL J 27 VIA DE LUNA DRVIE 82 Street Address (P.O. Box Number is Not Acceptable) PENSACOLA FL 32561 83 84 City Zip Code 85 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 Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered of Section 907,05,05, Florida Statutes. agent I am familiar with and socep SIGNATURE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)12 13. ☐ DELETE Change 1.1 TITLE TITLE RUSSO, MICHAEL J 1.2 NAME 27 VIA DE LUNA DRIVE 1.3 STREET ADDRESS STREET AUDRESS PENSACOLA FL CITY-ST-ZIP 1.4 CITY - ST - ZIP Addition DELETE Change 21 TITLE THILE 22 NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 City-St-ZIP CITY-ST-ZIF DELETE Change Addition TITLE 31 TITLE

6.4 CITY-ST-ZIP

14. I do hereby cert fy 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 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

32 NAME

41 TITLE

4 2 NAME

5.1 TITLE

5.2 NAME

6 1 TITLE

62 NAME

3 3 STREET ADDRESS 3 4. CITY - ST - ZIP

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Charling and type of replaced name of signing officer on director. Michael

DELETE

DELETE

DELETE

CHARL J. RUSSO/1-13-96/932-0

Addition

Addition

Addition

Change

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FILED

Feb 03 1997 8:00am

Secretary of State