

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED  
 Jul 30 1998 8:00am  
 Secretary of State

<b>PROFIT CORPORATION ANNUAL REPORT 1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mörtham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P95000058381 (1)**  
 1. Corporation Name  
**NETAGE, INC.**



Principal Place of Business 9951 ATLANTIC BLVD. SUITE 310 JACKSONVILLE FL 32225 US	Mailing Address 9951 ATLANTIC BLVD. SUITE 310 JACKSONVILLE FL 32225 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 9951 ATLANTIC BLVD Suite, Apt. #, etc. 22 SUITE # 310 City & State 23 JACKSONVILLE FL Zip Country 24 32225 25 U.S.A	2a. Mailing Address 26 9951 ATLANTIC BLVD Suite, Apt. #, etc. 27 SUITE # 310 City & State 28 JACKSONVILLE FL Zip Country 29 32225 30
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3. Date Incorporated or Qualified 07/25/1995	4. FEI Number 59-3328894	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent  
**HALADY, GURUNATH M**  
 9951 ATLANTIC BLVD.  
 SUITE 310  
 JACKSONVILLE FL 32225

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 \_\_\_\_\_ DATE 07/7/98

12. OFFICERS AND DIRECTORS

TITLE P	<input type="checkbox"/> DELETE
NAME HALADY, GURUNATH M	
STREET ADDRESS 9951 ATLANTIC BLVD., STE. 310	
CITY-ST-ZIP JACKSONVILLE FL 32225	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
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 type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	000002604250
5.3 STREET ADDRESS	-07/31/98--01071--014
5.4 CITY-ST-ZIP	***150.00
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 annual report is supplemental annual reports 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 from an attachment with an address.

SIGNATURE: \_\_\_\_\_ DATE 07/7/98

CR2E034 (5/98)

PC  
7-30

PG 2.

Florida Department of State,  
Division of Corporations,  
P.O. Box. 6327  
Tallahassee Florida-32314.

07/08/98

Sir,

Herewith I am enclosing the check for \$150.00 as a filing fees annual report 1998. The report says it is 2<sup>nd</sup> notice. But this is first time we received the notice and as soon as on receipt I am responding.

If you have any question please call me at 904-724-7000 Ex 213.

Sincerely,

Patricia Chandirasegar.

Accounts Executive.