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

CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Apr 07 1998 8:00am Secretary of State

1, Corporatio	JTER NETWORKING SERV	VICES, INC.	)			 
Principal Place of Business		Mailing Address	Mailing Address		S SERVIDES (LE IDLIA BLISS DOINS DONS DOIS TOST	11910 B11 4 B1818 150   A16  168
335 MADEIRA CIRCLE TIERRA VERDE FL 33715		335 MADEIRA CIR TIERRA VERDE FL 33715		DO MOT IMPLIES IN TO	IIIO DOMOS	
US		US			DO NOT WRITE IN TH	IIS SPACE
					3. Date Incorporated or Qualified 02/22/1996	
2. Principal P	lace of Business	2a, Mailing Address		4. FEI Number	Applied For	
21 26		<u>⊢</u> ¬	n		59-3360674	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, otc.				\$8.75 Additional
27		27			5. Certificate of Status Desired	Fee Required
I City & State	y & State City & State				6. Election Campaign Financing	\$5.00 May Be
23	28		<u></u>		Trust Fund Contribution	Added to Fees
Zip		Country Zip Co		1	8. This corporation owes or has paid the	
24	25 9. Name and Address of Curr	29	30		Personal Property Tax due June 30.	L Yes □ No
DA:		aut uefisteteo Weut	81	Name	10. Name and Address of New Register	ed Agent
	MES, CHARLES J 5 MADEIRA CIRCLE		Ľ.	INDIVIS		
	RRA VERDE FL 33715		82	Street Addr	ress (P.O. Box Number is Not Acceptable)	
116	NNA VENDE FL 33/15		83			
			84	City		85 Zip Code
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above				a-named core	voration cubmite this statement for the purpose	o of observing its registered
i onice or n	egi <b>ste</b> red agent, or both, in the Sta m <b>fa</b> miliar with, and accept the obli	ite of Florida. Such change was	: AUIDONZACI DV	z iha carnarat	tion's board of directors. I hereby accept the	appointment as registered
	The second with and accept the con	gations of, section cor.coco, i	ionda statutes	э.		
SIGNATURE	Signature, typed or printed name of registured a	agont and title if applicable. (NO	ITE Registered Age	ont signature requir	red when roinstating) DATI	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	PST	☐ DELETE	1.1 THTLE			Change Addition
NAME			1.2 NAME			];
STREET ADDRESS			1.3 STREET	ADDRESS		
CITY-ST-ZIP	HERRA VERUE FL			T- ZIP		
TITLE	ODADY CAROLYN I	T DELETE 2.				Change Addition
NAME	GRADY, CAROLYN J		2.2 NAME	ļ		
STREET ADDRESS	335 MADEIRA CIRCLE TIERRA VERDE FL		2.3 STREET			
CITY-ST-ZIP TITLE	TIENNA VENDE FL	DELETE	2 4 CITY-S1-ZIP			
NAME		[_] DELETE	3 1 117LE			Change Addition
STREET ADDRESS	1		3.2 NAME	00100104		
CITY+ST-ZIP			3 3 STREET 3 4. City - S			
TITLE			4.1 TITLE	1 · ZIF		Change Addition
NAME			4. 2 NAME			onlings realiter
STREET ADDRESS			4.3 STREET	ADDRESS		į
CITY+ST-ZIP			4.4 CITY-S1-ZIP			
TITLE	-	DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME			V
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST			
TITLE		DELETE	6.1 THILE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET	ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST	- ZIP		
14. I hereby co	ertify that the information supplied	with this filing does not qualify f	or the exempt	ion stated in §	Section 119.07(3)(i), Florida Statutes, I further	certify that the information

Thereby certify that the information supplied with this tiling doos not quality for the exemption stated in Section F19.07(3)(i). Florida Statules, Frurtner 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.