## FILED Feb 25, 2000 8:00 am Secretary of State

COMNET	realty, Inc.			i		90018 042 ***150		
Principal Plac	e of Business	Mailing Address	·					
1900 CORPORATE BLVD. SUITE 102 WEST BOCA RATON FL 33431 US		1900 CORPORATE BLVD. SUITE 102 WEST BOCA RATON FL 33431-8502 US				25259	JIJJ <b>u</b> 1814 1 <b>89</b> 1	
2. Principal P	lace of Business	3. Mailing Address	<del></del>	<del>-</del>				
1900 NW Corporate Blvd.		1900 NW Corporate Blvd.			i inchiden din Ibini (Alti dugi) aniil i	1914) ABTIA 1191( BAIEN ATIAN 1	(11140 1014 100)	
Suite 102 West		Suite Apt. #, etc. Suite 102 West			DO NOT WRITE IN THIS SPACE			
City & State Boca Raton, FL 33431		City & State Boca Raton, FL 33431		4.	FEI Number 65-0816499 Applied Fo		pplied For lot Applicable	
Zip Zip	Country	Zip	Country			¢2.75 Δ		
<b>-</b> -	USA		USA_	5.	Certificate of Status Desired	Fee Require		
	6. Name and Address of Current R	egistered Agent		7.	Name and Address of New Re	gistered Agent		
			Name Hai	ry Zuke	er			
ZUKI	Street A	et Address (P.O. Box Number is Not Acceptable)						
190	190	900 NW Corporate Blvd. #102West						
BOC	A RATON FL 33432							
			City	. D. b		FL Zip Cod		
B. The above	named entity submits this statement for	the purpose of changing its		a Raton	gent or both in the State of Flor		51	
e. The above	named entity submits this statement for	trie purpose of changing its	registered bilice o	Liedistered at	gent, or both, in the state of hior	ida.		
OLONIATIONS								
SIGNATURÉ .	Signature, typed or printed name of registered agent an	d title if applicable. (NOTE	: Registered Agent signa	ture required when	reinstating)	DATE	<del></del>	
9 This corpo	visting is aligible to satisfy its Intendible	FILE NOW!	!! FEE IS \$150.	00				
			00 Fee will be \$		<ol> <li>Election Campaign Fina Trust Fund Contribution</li> </ol>		00 May Be	
(See criter	ia on back)	Make Check Payab	le to Departmer	it of State	Trust i dina contribution		IU (0 1 663	
11.	OFFICERS AND D	IRECTORS	12.	A	DOITIONS/CHANGES TO OFFIC	CERS AND DIRECTOR	RS IN 11	
TITLE	VPT	☐ Delete	TITLE	D		<b>XX</b> Change	Addition	
NAME	LUPO, JACK		NAME	Lupo,				
STREET ADDRESS CITY-ST-ZIP	1900 CORPORATE BLVD., #102-\	N	STREET ADDRESS CITY-ST-ZIP	1	Glades Rd. #C			
	BOCA RATON FL 33431		<del></del>	P/S	Raton, FL 33432	XX Change	Addition	
TITLE NAME	ZUKER, HARRY	☐ Delete	TITLE NAME		Zuker	2021 Change	Addition	
STREET ADDRESS 1900 NW CORPORATE BLVD, #103-W			STREET ADDRESS		NW Corporate Blv	d. #102W		
CITY-ST-ZIP BOCA RATON FL 33432			CITY-ST-ZIP		Raton, FL 33431			
TITLE	7-7, - 7 - 7	□ Delete	TITLE	VP· ~		☐ Change	XX Addition	
NAME			NAME	Barry	/ Johnson			
STREET ADDRESS			STREET ADDRESS	1900	NW Corporate Blv	d. #102W		
CITY-ST-ZIP			CITY-ST-ZIP		Raton, FL 33431		XX Addition	
TITLE NAME		☐ Delete	, TITLE NAME	T	da tamat	☐ Change	XX Addition	
STREET ADDRESS			STREET ADDRESS		lis Lampel NW Corporate Blvo	J #100tJ	l	
CITY-ST-ZIP			CITY-ST-ZIP		Raton, FL 33431	1. WIOZW		
TITLE		☐ Delete	TITLE	Jula	-Natura - Et - Juan -	☐ Change	Addition	
NAME			NAME					
STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP	ļ		FT at		
TITLE		Delete	TITLE			☐ Change	Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP				j	
13. I hereby o	certify that the information supplied with on this report or supplemental report is	this filling does not qualify for	the exemption sta	ited in Section	n 119.07(3)(i), Florida Statutes, 1	further certify that the	information	

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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

THIN ED NAME OF SIGNING OFFICER OR DIRECTOR

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000020639

1. Entity Name

2/18/00

561-999-0006

Date

Daytime Phone #