01/14/2005 16:03 16503473737 CW FINA

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Mar 14, 2005 8:00 am
Secretary of State
03-14-2005 90082 050 ***158.75

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F04000000705

1. Entity Name
MICKEYNET, INC.

Principal Place of Business	Mailing Address
7345 SAND LAKE ROAD, SUITE 205 ORLANDO, FL 32819	851 BURLWAY ROAD, SUITE 525 BURLINGAME, CA 94010

01142005 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
610 SYCAMORE STREET	610 SYCAMORE STREET
Suite, Apt. #, etc. SUITE 110	Suite, Apt. #, etc. SUITE 110
City & State CELEBRATION, FL	City & State CELEBRATION, FL
Zip / Country 34747 / USA	Zip / Country 34747 / USA

4. FEI Number
94-3370606
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired XX $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GERMANO, ATSUKO
7345 SAND LAKE ROAD, SUITE 205
ORLANDO, FL 32819

7. Name and Address of New Registered Agent

Name: GERMANO, ATSUKO
Street Address (P.O. Box Number is Not Acceptable):
610 SYCAMORE STREET #110
City: CELEBRATION FL Zip Code: 34747

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ 1/14/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $160.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PC GERMANO, ATSUKO 1341 DAVID STREET, SUITE 321 SAN MATEO, CA 94403	☐ Delete	PC GERMANO, ATSUKO 12021 VILLANOVA DRIVE #110 ~~ORLANDO, FL 32837~~	XX Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VT TAKEHARA, TONY HIROSHI 2723 SOUTH NORFOLK STREET, #203 SAN MATEO, CA 94403	☐ Delete	VT TAKEHARA, TONY HIROSHI 2712 STONE OAK DRIVE ~~ORLANDO, FL 32837~~	XX Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 1/14/05 321-939-2393
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #