

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000005868

Entity Name: 11I NETWORKS INC.

FILED  
Apr 29, 2008  
Secretary of State

## Current Principal Place of Business:

5301 N FEDERAL HWY, SUITE 380  
BOCA RATON, FL 334874915

## New Principal Place of Business:

## Current Mailing Address:

5301 N FEDERAL HWY, SUITE 380  
BOCA RATON, FL 334874915

## New Mailing Address:

FEI Number: 26-0805141

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SILVAS, CHRISTINE ANNE  
5301 N FEDERAL HWY, SUITE 380  
BOCA RATON, FL 334874915 US

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DS ( ) Delete  
Name: SILVAS III, DOMINGO M  
Address: 5301 N FEDERAL HWY, SUITE 380  
City-St-Zip: BOCA RATON, FL 334874915

Title: P ( ) Delete  
Name: CANDELARIA, ALMA R  
Address: 5301 N FEDERAL HWY, SUITE 380  
City-St-Zip: BOCA RATON, FL 334874915

Title: D ( ) Delete  
Name: SILVAS, CHRISTINE ANNE  
Address: 5301 N FEDERAL HWY, SUITE 380  
City-St-Zip: BOCA RATON, FL 334874915

Title: T ( ) Delete  
Name: KASPER, MARK  
Address: 5301 N FEDERAL HWY, SUITE 380  
City-St-Zip: BOCA RATON, FL 334874915

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTINE SILVAS

CEO

04/29/2008

Electronic Signature of Signing Officer or Director

Date