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Apr 07 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F95000002812 (4)

1. Corporation Name
ISSUES & ANSWERS NETWORK, INC.



Principal Place of Business
5151 BONNEY ROAD
VIRGINIA BEACH VA 23462

Mailing Address
5151 BONNEY ROAD
VIRGINIA BEACH VA 23462-4314

| | |
|---|---------------------------------------|
| 3. Date Incorporated or Qualified 06/30/1995 | 3a. Date of Last Report 05/01/1996 |
| 4. FEI Number 62-1341814 | 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 has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |

| | |
|--------------------------------|-------------------------|
| 2. Principal Place of Business | 2a. Mailing Address |
| 21. Suite, Apt. #, etc. | 26. Suite, Apt. #, etc. |
| 22. City & State | 27. City & State |
| 23. Zip | 28. Zip |
| 24. Country | 29. Country |
| 25. Country | 30. Country |

9. Name and Address of Current Registered Agent
MITCHELL, WALTER
8923 WESTERN WAY
JACKSONVILLE FL 32256

| |
|---|
| 10. Name and Address of New Registered Agent |
| 81. Name Jon Dinet |
| 82. Street Address (P.O. Box Number is Not Acceptable) 15300 Imperial Street |
| 83. City Bonita Springs |
| 84. FL |
| 85. Zip Code 33923 |

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: *[Signature]* DATE: 04/01/97
(NOTE: Registered Agent signature required when reinstating)

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|-------------------------|---|---------------------------|
| TITLE PD | MCQUINNNESS, PETER J | 1.1 TITLE | |
| NAME | 2017 BAY ROAD | 1.2 NAME | |
| STREET ADDRESS | VIRGINIA BEACH VA | 1.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 1.4 CITY-ST-ZIP | |
| TITLE D | BALDI JR, JOSEPH F | 2.1 TITLE | |
| NAME | 14 ARMOND COURT | 2.2 NAME | |
| STREET ADDRESS | HOLMDALE NJ | 2.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 2.4 CITY-ST-ZIP | |
| TITLE D | RUBENSTEIN, LAWRENCE | 3.1 TITLE | |
| NAME | 27 WILMOT CIRCLE | 3.2 NAME | |
| STREET ADDRESS | SCARSDALE NY | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 3.4 CITY-ST-ZIP | |
| TITLE VS | LINDEMANN, CARLA | 4.1 TITLE | |
| NAME | 2304 MOSSY HOLLOW PLACE | 4.2 NAME | |
| STREET ADDRESS | VIRGINIA BEACH VA | 4.3 STREET ADDRESS | 2 Ipswich Avenue, Apt 328 |
| CITY-ST-ZIP | | 4.4 CITY-ST-ZIP | Great Neck, NY 11021 |
| TITLE | | 5.1 TITLE | |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 5.4 CITY-ST-ZIP | |
| TITLE | | 6.1 TITLE | |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 6.4 CITY-ST-ZIP | |

14. I do 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 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, changed, or on an attachment with an address.

SIGNATURE: *[Signature]* DATE: 3/27/97 757 456 1100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)