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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

STREET ADDRESS

SIGNATURE:

OTY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

May 08 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F96000006149 (6)

AMERICAN FIBERNET, INC.

400 E. CENTRE PARK BLVD., STE, 205 400 E. CENTRE PARK BLVD., STE. 205 DESOTO TX 75115 DESOTO TX 75115-8802 3. Date Incorporated or Qualified 3a. Date of Last Report 11/22/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 75-2587332 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional \Box 5. Certificate of Status Desired Fee Required 27 22 City & State City & State Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Zφ Country Zip This corporation has liability for intangible tax under s. 199.032, 30 Florida Statutes Yes No 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD 82 Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 84 City Zip Code 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 Sign if mellipped or printed name of registered agent and tille if applicable (NOTE: Registered Agent signature required when reinstating) 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. (96/6) TITLE ☐ DELETE 1.1 TITLE Change Addition COLE, IVAN NAME 1.2 NAME 500 OLDHAM ST. STREET ADDRESS 1.3 STREET ADDRESS **WAXAHACHIE TX 75165** 1.4 CITY-ST-ZIP CITY-S1-ZIP Addition DELETE Change TITLE 2.1 TITLE COLE, PEGGY NAME 2.2 NAME 500 OLDHAM ST. STREET ADORESS 2.3 STREET ADDRESS)44 **WAXAHACHIE TX 75165** 2 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition THUE 3 1 TITLE 32 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZP 3.4. CITY - ST - ZIP DELETE Change Addition 41 TITLE THILE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CHTY - ST - ZIP 4.4 CITY - ST- ZIP DELETE Change Addition 5.1 TITLE 1/10 5.2 NAME 5.3 STREET ADDRESS STREET ADORESS 54 CITY-ST-ZIP CHTY - ST-ZIP THILE DELETE 61 TITLE Change Addition 6.2 NAME NAME

6.3 STREET ADDRESS

IVAN COLE, PRESIDENT

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 if changed, or on an attachment with an address.

STONGE PRINTED NAME OF SIGNING OFFICER OR DIRECTOR