

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

FILED
Jan 15 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # F96000006588 (5)

1. Corporation Name

NETWORK MEDIA MARKETING CORPORATION



Principal Place of Business

1020 NW 6TH ST., BLDG. H&I
DEERFIELD BEACH FL 33442

Mailing Address

1020 NW 6TH ST., BLDG. H&I
DEERFIELD BEACH FL 33442

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/17/1996

4. FET Number

65-0695578

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 1650 S. Dixie Highway
Suite, Apt. #, etc.

22 3rd Floor
City & State

23 Boca Raton, Florida
Zip Country

24 33432 25 Palm Beach

2a. Mailing Address

26 1650 S. Dixie Highway
Suite, Apt. #, etc.

27 3rd Floor
City & State

28 Boca Raton, Florida
Zip Country

29 33432 30 Palm Beach

9. Name and Address of Current Registered Agent

GOODMAN, STEPHEN M.
1020 NW 6TH ST.,
BLDG. H & I
DEERFIELD BEACH FL 33442

10. Name and Address of New Registered Agent

81 Name

Denise Battista

82 Street Address (P.O. Box Number is Not Acceptable)

1650 S. Dixie Highway

83

3rd Floor

84

City
Boca Raton

FL 85 Zip Code
33432

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 typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

1/7/98

12. OFFICERS AND DIRECTORS

TITLE DP ☒ DELETE

NAME HAMMETT, SHARLENE
STREET ADDRESS 1020 NW 6TH ST., BLDG. H&I
CITY-ST-ZIP DEERFIELD BEACH FL 33442

TITLE ST ☒ DELETE

NAME MANCUSO, JOY
STREET ADDRESS 1020 NW 6TH ST., BLDG. H&I
CITY-ST-ZIP DEERFIELD BEACH FL 33442

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ST ☒ Change ☐ Addition

1.2 NAME Denise Battista
1.3 STREET ADDRESS 1650 S. Dixie Highway, 3rd Floor
1.4 CITY-ST-ZIP Boca Raton, Florida 33432

2.1 TITLE p ☒ Change ☐ Addition

2.2 NAME Sharlene Hammett
2.3 STREET ADDRESS 1650 S. Dixie Highway, 3rd Floor
2.4 CITY-ST-ZIP Boca Raton, Florida 33432

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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***150.00

14. 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 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.

SIGNATURE

Signature of registered agent

1/7/98

CR2E034 (10/97)