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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9700000835 (5)

INET INTERACTIVE NETWORK SYSTEM, INC.

Principal Place of Business

Mailing Address

FILED

Apr 24 1998 8:00am

Secretary of State

1840 S. SEPULVEDA BLVD., STE. 320 LOS ANGELES CA 90025		1640 S. SEPULVEDA BLVD., STE. 320 LOS ANGELES CA 90025				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
						02/14/1997		
2. Principal Pi	ace of Business	2a. Mailing Address		••••		4. FEI Number Applied I	or	
21		26				95-4553733 Not Appl		
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired 38.75 Additio	nal	
22		27				5. Certificate of Status Desired Fee Required	l	
City & State		City & State	City & State			6. Election Campaign Financing \$5.00 May E	3e	
23		28			Trust Fund Contribution Added to Fee			
Zip	Country	Zip	Cour	itry		8. This corporation owes or has paid the current year Intangible	е	
24	25 Name and Address of Curre	29	30			Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent		
NO		iii negistered Agent		81	Name	10. Name and Address of New Neglicied Agent		
NRAI SERVICES, INC. 528 E. PARK AVE.				\bot				
	LAHASSEE FL 32301		-	82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
IAL	LAMASSEE PL S2SUT		- -	83				
			L					
	i.		1	84	City	FI 85 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 Signature, typoid or printed nance of registered agent and take if appealable (NOTE: Registered Agent signature required when reinstating) DATE								
12.		ID DIRECTORS	13.	He.	it afficiency reduited	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	2	
TITLE	CPT	DELETE	1.1 101	LF			ddilion	
NAME	BUCHERT, CLAUDE		1.2 NA1	VΕ				
STREET ADDRESS	1640 S. SEPULVEDA BLVD.,	STE. 320	1.3 STF	REE1 /	ADDRESS			
CITY-ST-ZIP	LOS ANGELES CA 90025		1.4 CIT	Y-S1	1-ZIP			
TITLE	CVS	DELETE	2.1 7(1)	LE		☐ Change ☐ A	ddition	
NAME	LEGENDRE, HELENE		2.2 NA	ME		And the second second		
STREET ADDRESS	1640 S. SEPULVEDA BLVD.,	STE. 320	2.3 STF	REFT	ADDRESS			
CITY-ST-ZIP	LOS ANGELES CA 90025		2 4 017		.T-ZIP			
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NAME			3.2 NAI					
STREET ADDRESS			3		ADDRESS			
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NAME			5.1 HIII		1	onange r		
					ADDRESS			
STREET ADDRESS				-				
CITY-ST-ZIP TITLE		DELETE	5.4 C(T 6.1 T(T)		zir	☐ Change ☐ A	ddition	
NAME		time court	6.2 NA					
STREET ADDRESS			ŧ		ADDRESS			
OTHECT MOUNESS			0.3 317	ILL I	AUDITEGO			

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 chafford, or on an altachment with an address.

NONETHER AND MERCHE GRENTOR MICHAGO

CR2E034 (10/97)