

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 03, 1999 8:00 am
Secretary of State

03-03-1999 90019 004 ***150.00

DOCUMENT # F97000001874

1. Corporation Name
GST NET, INC.

Principal Place of Business
4001 MAIN ST
VANCOUVER WA 98663
US

Mailing Address
4001 MAIN ST
VANCOUVER WA 98663
US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/24/1997

4. FEI Number

91-1694180

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
PCD
BASILE, JR. J
STREET ADDRESS
4317 NE THURSTON WAY
CITY-ST-ZIP
VANCOUVER WA 98662

TITLE ☒ DELETE

NAME
VTD
SANDER, CLIFFORD V
STREET ADDRESS
4001 MAIN ST
CITY-ST-ZIP
VANCOUVER WA 98663

TITLE ☒ DELETE

NAME
SD
IRWIN, STEPHEN
STREET ADDRESS
505 PARK AVENUE
CITY-ST-ZIP
NEW YORK NY

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 ☐ Change ☒ Addition

1.2 NAME
S. Jeffrey Mayhock
1.3 STREET ADDRESS
4001 Main Street
1.4 CITY-ST-ZIP
Vancouver, WA 98663

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME
Daniel Trampush
2.3 STREET ADDRESS
4001 Main St.
2.4 CITY-ST-ZIP
Vancouver, WA 98663

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME
Robert Ferchat
3.3 STREET ADDRESS
4001 Main St.
3.4 CITY-ST-ZIP
Vancouver, WA 98663

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME
Jack Armstrong
4.3 STREET ADDRESS
4001 Main St.
4.4 CITY-ST-ZIP
Vancouver, WA 98663

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

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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-5-99

360-356-7100

CR2E034 (11/98)

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