

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

FILED
May 06 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F97000004378 (2)**

1. Corporation Name
C-NET SYSTEMS, INC.



Principal Place of Business 1025 S. SEMORAN BLVD., STE 1093 WINTER PARK FL 32792	Mailing Address 1025 S. SEMORAN BLVD., STE 1093 WINTER PARK FL 32792
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <u>Florida - Orlando</u>		2a. Mailing Address 26 <u>871 Cape Dory Ct</u>		3. Date Incorporated or Qualified 08/20/1997	
Suite, Apt. #, etc. 22 <u>Suite 1105</u>		Suite, Apt. #, etc. 27		4. FEI Number 58-2208117	
City & State 23 <u>Winter Park Orange</u>		City & State 28		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 24 <u>32792</u>	Country 25	Zip 29	Country 30	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
g. Name and Address of Current Registered Agent XUE, GEORGE M 1025 SEMORAN BLVD, STE 1093 WINTER PARK FL 32792				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

10. Name and Address of New Registered Agent 81 Name <u>George Xue</u> 82 Street Address (P.O. Box Number is Not Acceptable) <u>871 Cape Dory Ct</u> 83 <u>Suite 1105</u> 84 City <u>Winter Park</u> FL 85 Zip Code <u>32792</u>	
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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 George Xue President 04-22-98
Signature typed or printed (Name of registered agent and title if applicable) (NOTE: Registered Agent signature required when registering) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PCD	<input checked="" type="checkbox"/> DELETE	1.1 TITLE PCD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME HUANG, JOANNA		1.2 NAME <u>George Xue</u>	
STREET ADDRESS 871 CAPE DORY COURT APT 1105		1.3 STREET ADDRESS <u>871 Cape Dory Ct, #1105</u>	
CITY-ST-ZIP WINTER PARK FL		1.4 CITY-ST-ZIP <u>Winter Park, FL 32792</u>	
TITLE VSD	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME XUE, GEORGE M		2.2 NAME	
STREET ADDRESS 1025 S. SEMORAN BLVD STE 1093		2.3 STREET ADDRESS	
CITY-ST-ZIP WINTER PARK FL		2.4 CITY-ST-ZIP	
TITLE TD	<input checked="" type="checkbox"/> DELETE	3.1 TITLE TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME HUANG, JOANNA		3.2 NAME <u>George Xue</u>	
STREET ADDRESS 871 CAPE DORY COURT APT 1105		3.3 STREET ADDRESS <u>871 Cape Dory Ct, #1105</u>	
CITY-ST-ZIP WINTER PARK FL		3.4 CITY-ST-ZIP <u>Winter Park, FL 32792</u>	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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.

CR2E034 (10/97)