

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

FILED
Jul 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
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DOCUMENT # **F97000005026 (6)**

1. Corporation Name

FINANCIAL INTRANET, INC.



Principal Place of Business

Mailing Address

**1 DAG HAMARSKJOLD PLAZA
NEW YORK NY 10017**

**1 DAG HAMARSKJOLD PLAZA
NEW YORK NY 10017**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/25/1997

4. FEI Number

88-0357272

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

2a. Mailing Address

21 410 SAMMILL RIVER RD

26 410 SAMMILL RIVER RD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

City & State

27

City & State

23 ARDSLEY, N.Y.

28 ARDSLEY, NY

Zip

Country

Zip

Country

24 10502

25

29 10502

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**AMERICAN REGULATORY SERVICES CORP
4701 NORTH FEDERAL HIGHWAY
LIGHTHOUSE POINT FL 33064**

81 Name

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

6635 W. Commercial Blvd

83

SUITE 220

84

City

TAMARAC

FL

85 Zip Code

33319

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 **Michael Kossin, Pres**

Signature typed or printed name of registered agent and the applicable

(NOTE: Registered Agent signature required when reinstating)

7/6/98

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD** ☐ DELETE

NAME **SHEPPARD, MICHAEL**

STREET ADDRESS **2 KATHY LANE**

CITY-ST-ZIP **SCARSDALE NY 10585**

TITLE **V** ☐ DELETE

NAME **MARX, MAURA**

STREET ADDRESS **141 E. 56TH STREET APT 4-E**

CITY-ST-ZIP **NEW YORK NY 10022**

TITLE **SD** ☐ DELETE

NAME **STEIN, BEN B**

STREET ADDRESS **1219 TALL PINE DRIVE**

CITY-ST-ZIP **APOPKA FL 32712**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☒ Change ☐ Addition

410 SAMMILL RIVER ROAD

ARDSLEY, NY 10502

☒ Change ☐ Addition

410 SAMMILL RIVER ROAD

ARDSLEY, NY 10502

☒ Change ☐ Addition

2115 GRANDBROOK CIRCLE #1320B

ORLANDO, FL 32810

☐ Change ☐ Addition

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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 unchanged, or on an attachment with an address.

SIGNATURE **Michael Kossin, Pres** **3/6/98** **10502**

CR2E034 (10/97)