03-05-1999 90063 020 \*\*\*150.00

## 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

1. Corporation	MENT # <b>G5755</b> Y NETWORK, INC.	9	<u>.</u>					
Principal Place	of Business	Mailing A	ddress		···	(		
11430 W. SAMP CORAL SPRING		11430 W. SAMPLE ROAD CORAL SPRINGS FL 33065				DO NOT WRITE IN THE	S SPACE	
						3. Date Incorporated or Qualifed 08/26/1983	<del></del>	
2. Principal Pl	ace of Business	2a. Mailin	g Address			4. FEI Number	<u> </u>	olied For
21		26				59-2334379	<del></del>	Applicable
Suite, Apt. 1	#, etc	27	Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A	quired
City & State		City 8	State		···-	6. Election Campaign Financing Trust Fund Contribution	\$5.00 i Added to	
Zip	Country	Zip <b>29</b>	3	Count 0	ry 	<ol> <li>This corporation owes the current year In Personal Property Tax.</li> </ol>	Yes	ĽNo .
	9. Name and Address of Curr	ent Registered	Agent			10. Name and Address of New Registered	I Agent	
CHRISTOPHER, DANIA R 3320 BANKS RD #101				8		dress (P.O. Box Number is Not Acceptable)		
MARGATE FL 33063				-	2			
MAN	GATE PL 33003			8	3			
					4 City	FI		
11. Pursuant to office or reagent. I as	to the provisions of Sections 607.0 egistered agent, or both, in the Stal m familiar with and accept the poli	502 and 607.150 te of Florida, Suc gations of, Section	h change was auti n 607.0505, Florid	a Statut	by the corporates.	rporation submits this statement for the purpose of tion's board of directors. I hereby accept the appointment of the purpose	Dilititierit as reg	registered jistered
SIGNATURE	Signature, typed or printed name registered a	gent and title if applicat	DAN/EL (NOTE: R	egistered Ag	Pent signature requir	Poffic L/19 red when reinstating) DATE	155	
12.		ND DIRECTOR		13.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE	PD		☐ DELETE	1.1 TITLE			Change	☐ Addition
NAME	FREVOLA, FRANK D.			1 2 NAM	Į.			
STREET ADDRESS	8501 NW 54TH COURT				ET ADDRESS			ļ
CITY-ST-ZIP	LAUDERHILL FL		C belete	1.4 CITY			[] Change	Addition
TITLE			☐ DELETE	2.1 TITLE			change	
NAME				2.2 NAM	_			{
STREET ADDRESS				•	ET ADDRESS	are the second of the second of	<b>.</b>	{
CITY-ST-ZIP			☐ DELETE	2.4 CITY 3.1 TITLE			Change	Addition
TITLE			Deterie	3.2 NAM				_
NAME					ET ADDRESS			
STREET ADDRESS				3.4. CITY				
CITY-ST-ZIP TITLE			DELETE	4.1 TITLE			Change	Addition
NAME			<del>-</del>	4. 2 NAM	1		=	
STREET ADDRESS				1	EET ADDRESS			-
CITY-ST-ZIP				4.4 CITY				
TITLE		<del></del>	DELETE	5.1 TITLE			☐ Change	☐ Addition
NAME				5.2 NAM				
STREET ADDRESS				5.3 STR	EET ADDRESS			
CITY-ST-ZIP				5.4 CITY	-ST-ZIP			
TITLE			☐ DELETE	6.1 TITLE			Change	☐ Addition

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 officeness, with all other like empowered.

6.2 NAME 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP