2007 FOR PROFIT CORPORATION

Apr 13, 2007 08:00 A Secretary of State **ANNUAL REPORT**

DOCUMENT # J94474

1. Entity Name REALNET, INC.

Principal Place of Business

Mailing Address

22715 CAMINO DEL MAR

22715 CAMINO DEL MAR

#65

BOCA RATON, FL 33433

#65 BOCA RATON, FL 33433 US

DO NOT WRITE IN THIS SPACE

03262007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0005908 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

FILED

6. Name and Address of Current Registered Agent

ROSENBAUM, GERALD M. 22715 CAMINO DEL MAR BOCA RATON, FL 33433

DO NOT WRITE IN THIS SPACE

				,	
	named entity submits this statement for the pions of registered agent.	ourpose of changing its registered off	fice or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and atte	if applicable (NOTE, Registered Agen	nt signature	required when reinstating)	OATE
FiL After M	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPVT ROSENBAUM, GERALD M. 22715 CAMINO DEL MAR #65 BOCA RATON, FL 33433		U00000703759		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			ş	•	04/20/07-80153-010 150.0
TITLE NAME STREET ADDRESS CITY-ST-ZIP			1.	DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN :	THIS SPACE
TITLE NAME STREET ADDRESS CITY: ST-ZIP				•	
FITLE NAME STREET ADDRESS			•	• • •	

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 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

GERALD M. ROSENDALIN

61212-0488