FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # K2

(1)

NETWORKS-LLS.A. XVI. INCORPORATED

NETWORKS-U-S-A- XVI, INCORPORATED				
Principal Place of Business	Mailing Address			1811 AIBIT BIAIL SIBIT ATAIL AIAIT BIAIL ISAL
800 BRICKELL AVE	800 BRICKELL AVE			
605 Miami Fl 33131	605 Miami Fl 33131 US			6 6 4 4 4
US			3. Date Incorporated or Qualified 04/18/1988	3a. Date of Last Report 04/27/1995
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 2005 N.E. 121 Rd.	26 P.O. Box	610096	65-0050530	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
City & State 23 N. M/AMI, PL Zip Country	28 N. MIAMI	FL	Trust Fund Contribution	Added to Fees
Zip Country	Ζφ	Country	8. This corporation has liability for in	
24 33 181 25	29 33261-009	6 30	Florida Statutes XYes	
9. Name and Address of Curr	ent Registered Agent	81 Name J	10. Name and Address of New Re	egistered Agent
			erome terdim	
FELDMAN, JEROME		82 Street Add	dress (P.O. Box Number is Not Acceptable	e)
800 BRICKELL AVE	_	83	2005 NE. 121 R	α
SUITE 605		83		
MIAMI FL 33131		84 City		FL 85 78 000 1
		//	. MIAMI	FL 23/8
11. Pursuant to the provisions of Sections 607.05 or registered agent, or both, in the State of Fit familiar with, and accept the obligations of Sc	.02 and 607.1508, Florida Stat onda: Such change was autho	utes, trie above named corpr rized by the corporation's bo	oration submits this statement for the purporal of directors. Thereby accept the appo	intment as registered agent. Lam
familiar with, and accept the obligations of Sc	ection 607,0505 Florida Statut	es.		1/2/101
SIGNATURE		N. TE. Rojeda ad Agent Signature Sejie		1 30/76
	profund the disposition (NO DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
TITLE DP	DECETE) : Title		Change Addition
NAME FELDMAN, JEROME		V / NAME		1 ~
STREET ADDRESS 800 BRICKELL AVE ,STE (R05	3 STREET ADDRESS		
City-St-zip MAMI FL	000	4 CHY S1 - ZIF		
TITLE T	☐ DELETE	A) Table		Change 🔲 Addition
MAME FELDMAN, MICHAEL		22 NAME		1 •
STREET ADDRESS 800 BRICKELL AVE ,STE	805	2.3 STREET ADDRESS	2005 NE 121 RD	
CITY - ST - ZIP MIAM FL		2.4 UHY+ST+ZIP	2005 NE 121 RD N. MIAMI PI 33	18(
TITLE S	DELETE	3 TITL€		Change
NAME FELDMAN, JASON		3 NAME		
STREET ADDRESS 800 BRICKELL AVE ,STE	605	3 STREET ADDRESS		
CITY-ST-ZIP MIAMI FL		3.4 CITY - S1 - ZIP		
THE	☐ DELETE	4 1 T'TLE		Change Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY · ST - ZIP		4.4 CiTy · ST · ZIP		Change Addition
TITLE	☐ DELETE	5 1 TITLE		
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
City-ST-ZiP	DELETE	5.4 CiTY - ST - ZiP	<u> </u>	17 PIGENIA Addition
TITLE	C) pertie	5 1 TITLE	90000184 -06/03/96010	121026
NAME		6.2 NAME - 6.3 STREFT ADDRESS	***200.00	ALL WHY
STREET ADDRESS	_	6.4 City: \$1-709	***************************************	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 cath, that I arm 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 it changed or on an attachment with an address

SIGNATURE;

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICEN OR DIRECTOR

4/30/26

(305)895-7000 P