2005 FOR PROFI	T CORPORATION	FILED Apr 11, 2005_08:00 AN
DOCUMENT # K40514 1. Entity Name STANET, INC.		Secretary of State
Principal Place of Business 851 VILLAGE BLVD SUITE 502 WEST PALM BCH, FL 33409 US	Mailing Address 851 VILLAGE BLVD SUITE 502 WEST PALM BCH, FL 33409 US	
DO NOT WRITE	E IN THIS SPACE	03012005 No Chg-P CR2E034 (10/03)
6. Name and Address of Curren	t Registered Agent	
KRASULAK, JANET L 10209 ALLAMANDA BLVD. PALM BEACH GARDENS, FL 33410	· · · · · ·	DO NOT WRITE IN THIS SPACE
The above named entity submits this statement f the obligations of registered agent.     SIGNATURE	ulak	fice or registered agent, or both, in the State of Florida. I am familiar with, and accept
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550 10. OFFICERS AND		\$5.00 May Be Added to Fees
TITLE D NAME KRASULAK, STANLEY STREET ADDRESS 10209 ALLAMANDA BLVD CITY-ST-ZIP PALM BCH GARDENS, FL	· · · · · · · · · · · · · · · · · · ·	U00000236398
ITTLE D NAME KRASULAK, JANET STREET ADDRESS 10209 ALLAMANDA BLVD DITY-ST-ZIP PALM BCH GARDENS, FL		U00000296998 04/11705-80009-020 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
<ol> <li>I hereby certify that the information supplied wit indicated on this report or supplemental report of the corporation or the receiver or trustee emp changed, or on an attachment with an address.</li> </ol>	In this filling does not qualify for the exemption is true and accurate and that my signature showered to execute this report as required by with all other like empowered.	n stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information that have the same legal effect as if made under oath; that I am an officer or director y Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if
SIGNATURE: 1 Samo	1	4/7/05 561-683-6226 Date Daytime Phone #