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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L64951

(1)

C-NET, INC.

FILED Feb 20 1997 8:00am Secretary of State



Principal Place of Business  **CORPCO INC 2699 S BAYSHORE DR 7TH FLOOR MIAMI FL 33133  2. Principal Place of Business 21  Suite, Apt. #, etc. 22  City & State 23		Suite, Apt	Suite, Apt. #, etc. 27 City & State			3. Date incorporated or Qu. 04/09/1990 4. FEI Number 65-0190680 5. Certificate of Status Des 6. Election Campaign Finar Trust Fund Contribution	iatified 3a. Da 03/2	3a. Date of Last Report 03/29/1996 Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be		
Zφ	Country	Zip		Country	'	8. This corporation has liab			. 199.032,	
24	25	29	30			Florida Statutes		No		
	g, Name and Address of Curr	ent Registered Agen	<u>t</u>			10. Name and Address of	New Registered A	gent		
COF	RPCO, INC.			81	Name					
2699	9 S BAYSHORE DR			82	Street Ad	dress (P.O. Box Number is Not A	ccentable)			
7TH	FLOOR			1	Oli Odi rid		,			
MIA	MI FL 33133			83						
				84	City			<b>85</b> Zip	Code	
				"	Oity		FL			
office or agent. La SIGNATURE	egistered agent, or both, in the Sta m familian with, and accept the obl Province tracks provided to Charlestered a OFFICERS A	igations of, Section 60 agent and little / applicable IND DIRECTORS	O7.Õ505, Florida (NOTE: Rega	Statute	S	ation's board of directors. I herek guired when reinstaling) ADDITIONS/CHANGES To	DAYE			
NAME	CUMMINGS, JAN R			1.2 NAME					, , , , , , , , , , , , , , , , , , ,	
STREET ADDRESS	3130 NW 108TH DRIVE		1		ADDRESS					
	CORAL SPRINGS FL		T I							
CHY-S1-ZIP TITLE	D	П		1.4 CITY - S 2.1 TITLE	1-71			Change	Addition	
NAMÉ	CUMMINGS, JAN, R		I .	2.2 NAME				Change	radinon	
Ï	3130 NW 108TH DR				ADDDCCC					
STREET ADDRESS CHTV-S1-Z00	CORAL SPRINGS FL			2. 4 CITY-	ADDRESS					
TITLE				3.1 TillE	51- Ur			☐ Change	Addition	
NAME		_		3 2 NAME						
STREET ADDRESS					ADDRESS					
CITY - ST - ZIP				3.4. CITY-	1					
TITLE	- ALL			4.1 TITLE				Change	Addition	
NAME				4. 2 NAME				•		
STREET ADDRESS			1		ADDRESS					
CITY - S1 - ZIP			1	4 4 CITY-5						
TOTALE				5 1 TITLE				Change	Addition	
NAME			I :	5 2 NAME						
STREET ADDRESS				5.3 STREET	ADDRESS					
CiTY - ST - ZIP				5.4 CITY - \$	l l					
TITLE	to an area to a service and a service at the servic			6.1 TITLE				Change	Addition	
NAME				6.2 NAME						
STREET ADDRESS			Į į	6.3 STREE	ADDRESS				į	
CITY - S7 - 7IP				6.4 CITY - (	ST-ZIP				į	

14. I do 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 his 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 effect ment with an address.

SIGNATURE:

OR DOINTED NAME OF SIGNING OFFICER OF

Jan R. Cummings, President

454-753-1776