


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

Certificate of Status
FILED
Requested
Jan 15, 2004 08:00 AM
Secretary of State

DOCUMENT # L64951	
1. Entity Name C-NET, INC.	

Principal Place of Business %CORPCO INC 2699 SBAYSHORE DR 7TH FLOOR MIAMI, FL 33133	Mailing Address 3055 HARBOR DRIVE UNIT 1001 FT LAUDERDALE, FL 33316 US
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01112004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0190680	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent CORPCO, INC. 2699 S BAYSHORE DR 7TH FLOOR MIAMI, FL 33133

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTSD CUMMINGS, JAN R 3055 HARBOR DR, UNIT 1001 FT LAUDERDALE, FL 33316
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01/15/04-80060-009 158.75

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Jan R. Cummings* 1/12/03 954-467-1535
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone
Jan R. Cummings, President