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Mar 28 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M14612 (9)

1. Corporation Name
NETWORK INVESTMENTS, INC.

Principal Place of Business
6262 BIRD ROAD, 3J-3K
MIAMI FL 33155

Mailing Address
6262 BIRD ROAD, 3J-3K
MIAMI FL 33155-4882



3. Date Incorporated or Qualified 04/29/1985
3a. Date of Last Report 04/16/1996

2. Principal Place of Business		2a. Mailing Address		4. FEI Number 59-2557192		Applied For Not Applicable	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
22 City & State		27 City & State		6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
23 Zip		28 Zip		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No			
24 Country		29 Country					
25		30					

9. Name and Address of Current Registered Agent

ZULUETA, IGNAICO G.
6262 BIRD ROAD
SUITE 3J
MIAMI FL 33155

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DS ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	ZULUETA, IGNAICO	1.2 NAME	
STREET ADDRESS	6262 BIRD ROAD, SUITE 3J	1.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL	1.4 CITY - ST - ZIP	
TITLE	V ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	URABANOWSKI, PARTICIA A.	2.2 NAME	
STREET ADDRESS	6262 BIRD ROAD, SUITE 3J	2.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL	2.4 CITY - ST - ZIP	
TITLE	T ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	ORRIOLS, ALINA J.	3.2 NAME	
STREET ADDRESS	6262 BIRD ROAD, SUITE 3J	3.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL	3.4 CITY - ST - ZIP	
TITLE	P ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	ZULUETA, JORGE A.	4.2 NAME	
STREET ADDRESS	6262 BIRD RD STE 3J	4.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL	4.4 CITY - ST - ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

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 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 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 attachment with an address.

SIGNATURE: *Alina J. Orriols* ALINA J. ORRIOLS 3-24-97 662-2800
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)