

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **M26541** (6)

1. Corporation Name

FLORIDA INTRANET GROUP, INC.



Principal Place of Business

Mailing Address

**C/O ROGER DOMINGUEZ
13026 SW 120TH ST.
MIAMI FL 33186
US**

**C/O ROGER DOMINGUEZ
13026 SW 120TH ST.
MIAMI FL 33186
US**

3. Date Incorporated or Qualified
01/28/1986

3a. Date of Last Report
03/06/1995

2. Principal Place of Business
21 **12350 SW 132 Court**

2a. Mailing Address
26 **12350 SW 132 Ct**

4. FET Number
59-2674189

Applied For
Not Applicable

22 **Suite 114**

27 **Suite 114**

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

23 **MIAMI, FL ?**

28 **MIAMI, FL**

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

24 **33186**

Country

29 **33186**

Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**DOMINGUEZ, ROGER
13026 SW 120TH ST.
MIAMI FL 3318**

81 Name **DOMINGUEZ, ROGER**

82 Street Address (P.O. Box Number is Not Acceptable)
12350 SW 132 Court

83 **Suite 114**

84 City **MIAMI**

FL

85 Zip Code **33186**

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

Signature typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent's signature required when not stating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE
NAME **DOMINGUEZ, ROGER**
STREET ADDRESS **11125 SW 126TH STREET**
CITY-ST-ZIP **MIAMI FL**

TITLE **D** ☐ DELETE
NAME **MILLS, ALLAN J.**
STREET ADDRESS **7709 S.W. 7TH PL.**
CITY-ST-ZIP **N. LAUDERDALE FL**

TITLE **PD** ☐ DELETE
NAME **DOMINGUEZ, GERMAN**
STREET ADDRESS **12630 SW 114TH AVE.**
CITY-ST-ZIP **MIAMI FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP **Zip code = 33176**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP **Zip code = 33068**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP **Zip code = 33176**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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