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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # M26541

1. Corporation Name

FLORIDA INTRANET GROUP, INC.

Principal Place of Business		Mailing Address				######################################	)	
12350 SW 132	END COURT	12350 SW 132ND COURT						
SUITE 114 SUITE 114								
MIAMI FL 33186 MIAMI FL 33186					DO NOT WRITE IN THIS SPACE			
US		US			3. Date Incorporated or Qualifed 01/28/1986			
Principal Place of Business  21		2a. Mailing Address 26			4. FEI Number	Ap	plied For	] ::
					59-2674189		t Applicable	16
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	′ \$8.75 <i>/</i>		'
22		27					quired ·	1
City & State		City & State			6. Election Campaign Financing	\$5.00		
23		28			Trust-Puno Contribution		o Fees	
Zip Country		Zip Country		8. This corporation owes the current ye	ear Intangible	<b>™</b> No		
24	25	·	10 j		Personal Property Tax.		LIZ NO	-
	9. Name and Address of Curren	t Registered Agent	8	1 Name	10. Name and Address of New Regist	erea Agent		┨
DO	MINGUEZ, ROGER		"	Name	•		•	
12350 SW 132ND COURT			8	2 Street Addre	ess (P.O. Box Number is Not Acceptable)	a survey so there are a	e de la companya de l	
	TE 114		8	3		海道 郑		1
MIA	MI FL 33186		8	4 City		\$25, \$25,4315,5355	The Post (Self	┨
			l°	4 City		FL 85 Zip C	,ou <del>e</del>	-
office or	registered agent, or both, in the State of am familiar with, and accept the obligat	of Florida. Such change was auti ions of, Section 607.0505, Florid	horized b la Statute	y the corporationss.	ration submits this statement for the purpon's board of directors. I hereby accept the	appointment as re	registered gistered	
	Signature, typed or printed name of registered ageni OFFICERS ANI			ent signature required		TE		ŀ ́g
12.	D OFFICERS AN	D DELETE	13.	. 1	ADDITIONS/CHANGES TO OFFICER	Change	RS IN 12	11/98)
NAME	DOMINGUEZ, ROGER	1.2 NA			Fred Co. C. Service	[_] Officings		
STREET ADDRESS	44445 004 444514 075557			•	•			2
	MIAMI FL		1	ET ADORESS				1 4
CITY-ST-ZIP	D	. DELETE	1.4 CITY-			☐ Change	Addition	6
TITLE	MILLS, ALLAN J.		2.1 TITLE 2.2 NAME		•	· Change	- Addition	~
NAME	7700 O.W. 7711 DI							
STREET ADDRESS	N. LAUDERDALE FL			ET ADDRESS	*			
CITY-ST-ZIP	PD	☐ DELETE	2. 4 CITY			☐ Change	3.  Addition	┨
TITLE	DOMINGUEZ, GERMAN		3.1 TITLE			C Change	. [] Addition	
NAME			3.2 NAME					
STREET ADDRESS	12630 SW 114TH AVE.			ET ADDRESS	<b>"我们是我们的</b>			
CITY-ST-ZIP, .	MIAMI FL	□ DELETE	3.4. CITY				TOTAL SHAPE	-
TITLE		☐ DELETE	4.1 TITLE			☐ Change ≥	√ Mddition	
NAME			4. 2 NAM	_		•		
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP		□ oc: c==	4.4 CITY-					
TITLE	☐ DELETE 5.1 TITLE				☐ Change	Addition		
NAME			5.2 NAME					
STREET ADDRESS				ET ADDRESS				.7
CITY-ST-ZIP			5.4 CITY-	ST-ZIP			•	3,
TITLE		C politic	61777	<del></del>			□ 4 3 290 ·	
	*	☐ DELETE	6.1 TITLE	ı		☐ Change	Addition	
NAME STREET ADDRESS	•	☐ DELETE	6.2 NAME	ı		Change	Addition	

14. I 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 of truetee 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

**FILED** 

Jan 25, 1999 8:00am

**Secretary of State** 

01-25-1999 90049 031 \*\*\*158.75