
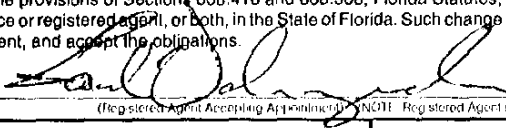



## 2nd NOTICE:

Limited Liability Company Will Be Dissolved On Or  
After October 8, 1997. If Dissolved, Minimum Amount  
Due To Reinstate: \$703.75

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS	
<b>FILING FEE</b> \$ 588.75		Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee + \$385.00 Late Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE	
1. Name and Mailing Address of Limited Liability Company		DOCUMENT # M96000000394	
VALNET COMMUNICATIONS, LLC 111 EIGHTH AVENUE, SUITE 1506-A NEW YORK CITY NY 10013		1a. Principal Place of Business Address 111 EIGHTH AVENUE, SUITE 1506 NEW YORK CITY NY 10013	
If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.			
2. Principal Place of Business		2a. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc. 1506A	
City & State		City & State	
Zip	Country	Zip	Country
10011		10011	
3. Date Organized or Qualified		3a. State of Formation	
10/10/1996		NY	
4. FEI Number		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
13-3849964			
5. Date of Last Report		6. Certificate of Status Desired	
		<input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent		8. Name and Address of New Registered Agent	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324		Name Street Address (P.O. Box Number is Not Acceptable) 100002289531--1 -09/10/97--01070--009 Suite, Apt. #, etc. ***\$588.75 ***\$588.75 City FL Zip Code	
9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.			
SIGNATURE 		DATE 9/13/97	
(Reg. stored Agent Accepting Appointment) (NOTE: Reg. stored Agent's signature required when reinstating)			
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	VALENZUELA, PAUL	111 EIGHTH AVENUE, SUITE 1	NEW YORK CITY NY
MGR	SANTOS, MICHAEL	111 EIGHTH AVENUE, SUITE 1	NEW YORK CITY NY

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE:

 Paul Valenzuela

9/13/97

SIGNATURE AND TITLE OF PRESENT NAME OF FORMING MANAGING MEMBER (FORM MANAGER)

Date

Daytime Phone #