2002 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P01000095250 NET3 INC.				May 15, 2002 8:00 am Secretary of State 05-15-2002 90154 019 ***150.00	
Principal Place of Business 2701 S. OCEAN HWY., STE. 24 HIGHLAND BEACH FL 33487	Mailing Address 2701 S. OCEAN HWY., STE. 24 HIGHLAND BEACH FL 33487			I STRATTONIA IN ARTON (PRV) ARTIS ARTSI ARTSI	
2. Principal Place of Business 52.55 N. Federa	3. Mailing Address	AME.			
Suite Ant. #. etc. FLOOR	Suite, Apt. #, etc.	1112		DO NOT WRITE IN TH	HIS SPACE
BOCA RATON		4.	FEI Number 65-1141914	Applied For Not Applicable	
^{2ip} 33487 ^{Country} U.S	Zip	Country		Certificate of Status Desired	\$8.75 Additional Fee Required
6. Name and Address of C	urrent Registered Agent	Name	7.	Name and Address of New Register	ed Agent
NRAI SERVICES, INC. 526 E. PARK AVE. TALLAHASSEE FL 32301	Street A	ddress (P.O. Box Number is Not Acceptable)			
		City		F	Zip Code
Signature, typed or printed name of registere This corporation is eligible to satisfy its Inta Tax filing requirement and elects to do so. (See criteria on back) OFFICERS	Pegistered Agent signatu FEE IS \$150.(2 Fee will be \$5 le to Department 12.	0 50.00 of State	IDAT	\$5.00 May Be Added to Fees	
	En Hwy. 3/2 PL FL 33 487	TITLE NAME STREET ADDRESS CITY - ST - ZIP	CHI DAV BOC	ARMAN 5 N Federack A RUTON FI	Change Addition
LE ME REET ADDRESS Y-ST-ZIP	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	4024 525 1300	ZELLER SN. Federac ARATON FL	Change Addition
AE ME EET ADDRESS (-ST-ZIP	- 💶 Delete	TITLE 4 NAME STREET ADDRESS CITY-ST-ZIP	VICE MICH 5255 BOCH	RESIDENT MEL BLAHNIK N. Federanc H CATON FL 3:	wy. 3mp
E IE EET ADDRESS '-ST-ZIP	C Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	AAN 52.53 BOCK	PRESIDENT ON SMITH N. Federman M MRATON FL 33	Change Addition
E IE EET ADDRESS - ST- ZIP	Delete	TITLE NAME Street Address City-St-Zip		, , , , , , , , , , , , , , , , , , ,	Change Addition
E E IET ADDRESS -ST-ZIP	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>,</u>		Change Addition
I hereby certify that the information sopplied indicated on this report or subplemental re- of the corporation or the receiver or trustee changed, or on an attachment with an add	emowered to execute this report of	he exemption state signature shall hav s required by Chap	d in Section 1 te the same le er 607, Floric	19.07(3)(i), Florida Statutes. I further c goal effect as if made under oath; that a Statutes; and that my name appears	ertify that the information I am an officer or director in Block 11 or Block 12 if