

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 # **P28684** (9)

1. Corporation Name

AMERICAN NETWORK EXCHANGE, INC.

Principal Place of Business

Mailing Address

100 W LUCERNE CIR
STE 100
ORLANDO FL 32801
US

101 PARK AVE
STE 2507
NEW YORK NY 10178
US



2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

03/29/1990

3a. Date of Last Report

01/30/1995

4. FEI Number

06-1303396

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

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

UNITED CORPORATE SERVICES, INC.
801 NORTHEAST 167TH STREET
SUITE 300
NORTH MIAMI BEACH FL 33162

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D

DETMARS, MICHAEL V.
100 W LUCERNE CIR
ORLANDO FL

☒ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

S

GROSS, AMY S
100 W LUCERNE CIR
ORLANDO FL

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

VP

HANNAY, TERESA
100 W LUCERNE CIR
ORLANDO FL

☒ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D

BARITZ, KENNETH
100 W LUCERNE CIR
ORLANDO FL

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D

RUIZ, EUGENE
100 W LUCERNE CIR
ORLANDO FL

☒ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

PD

IZZO, PETER M JR
100 W LUCERNE CIR
ORLANDO FL

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

Acting CFO
Stovn, Richard
100 W. Lucerne Cir
Orlando, FL 32801

☐ Change

☒ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

☐ Change

☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

☐ Change

☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

☐ Change

☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change

☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change

☐ Addition

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:

Richard Stovn
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Apr 22/96

(407) 246-1234

CR2E034 (12/95)