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FILED
Feb 05 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P32678** (5)
1. Corporation Name
AMER+NET SERVICES CORP.

Principal Place of Business 5140 W HURLEY POND RD FARMINGDALE NJ 07727 US	Mailing Address 5140 W HURLEY POND RD FARMINGDALE NJ 07727 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 01/29/1991	
21 Suite, Apt. #, etc.	26	27 Suite, Apt. #, etc.		4. FEI Number 22-3080531	
22 City & State	27	28 City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23 Zip	28	29 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24 Country	29	30 Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324		10. Name and Address of New Registered Agent	
		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	
		85 Zip Code	

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 signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	1.1 TITLE	
NAME	NICE, KENTON W	1.2 NAME	
STREET ADDRESS	5140 W HURLEY POND RD	1.3 STREET ADDRESS	
CITY-ST-ZIP	FRAMINGDALE NJ	1.4 CITY-ST-ZIP	
TITLE	VSD	2.1 TITLE	
NAME	RICCA, CHRISTOPHER	2.2 NAME	
STREET ADDRESS	5140 W HURLEY POND RD	2.3 STREET ADDRESS	
CITY-ST-ZIP	FARMINGDALE NJ	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	
NAME	KRAUSE, GARY	3.2 NAME	
STREET ADDRESS	209 E WILLIAMS SUITE 630	3.3 STREET ADDRESS	
CITY-ST-ZIP	WICHITA KA	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	
NAME	LAMAH, AHMAD	4.2 NAME	
STREET ADDRESS	300 CORPORATE CENTER DR	4.3 STREET ADDRESS	
CITY-ST-ZIP	MANALAPAN NJ	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 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:

NOT REQUIRED

1/27/98

800-800-7010

CR2E034 (10/97)