2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000006200

Entity Name: INTERNETWORK, INC.

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

19201 COLLINS AVE.

UNIT# 815

N. MIAMI BEACH, FL 33160 US

New Mailing Address: Current Mailing Address:

1001 N. FEDERAL HGWY. P.O. BOX 50774

SUITE# 238 SARASOTA, FL 34232 US

HALLANDALE BEACH, FL 33009 US

FEI Number: 65-0395012 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TOROK, TAMAS 1001 N. FEDERAL HGWY. **SUITE# 238**

HALLANDALE BEACH, FL 33009 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

City-St-Zip:

Electronic Signature of Registered Agent Date

Title:

Title:

Name:

Address:

Name:

Address:

City-St-Zip:

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

(X) Change () Addition

Title: () Delete POPPER, GYORGY DR. Name: GOLDMARK KAROLY UT 35. Address: City-St-Zip: BUDAPEST, H 1122 H

() Delete Title:

Name: TAMAS, TOROK 1001 N. FEDERAL HGWY., SUITE# 238 Address: City-St-Zip:

BRADENTON, FL 34203

Title: (X) Delete POPPER, ADAM Name: 6132 41ST STREET E Address:

HALLANDALE BEACH, FL 33009 US

BUDAPEST, H 1122 H City-St-Zip: Title: () Change () Addition

POPPER, ADAM

VPSD

POPPER, GYORGY DR.

BUDAPEST, H 1122 H

GOLDMARK KAROLY UT 35.

GOLDMARK KAROLY UT 35.

Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DR. GYORGY POPPER PTD 04/30/2009