FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 20 1998 8:00am

Secretary of State

CR2E034 (10/97

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P93000036066 (7)

DATANET SYSTEMS, INC.

Principal Place of Business Mailing Address 2301 TAMIAMI TRAIL 2301 TAMIAMI TRAIL DO NOT WRITE IN THIS SPACE PORT CHARLOTTE FL 33952 PORT CHARLOTTE FL 33952 3. Date Incorporated or Qualified 05/17/1993 Applied For 2. Principal Place of Business 2a. Mailing Address 18825 McGRATH CIR 26 Not Applicable 21 65-0414967 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing OTTE, FL33948 FORT П 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 30 # USA 24 25 29 Personal Property Tax due June 30. Yes Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent BARBIAN-JENKINS, KATHLEEN 2301-C TAMIAMI TRAIL Street Address (P.O. Box Number is Not Acceptable)
18825 MC GRATH CIRC **PORT CHARLOTTE FL 33952** 83 $i \in \mathbb{N}$ HARLOTTE URT 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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 will, and accept the obligations of, Section 607.0505, Florida Statutes. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. PΤ DELETE Change Addition TITLE 1.1 TITLE NAME JENKINS, MICHAEL E 1.2 NAME 2301-C TAMIAMI TRAIL STREET ADDRESS 1.3 STREET ADDRESS PORT CHARLOTTE FL 33952 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition Change TITLE 21 101 E BARBIAN-JENKINS, KATHLEEN M 2.2 NAME STREET ADDRESS 2301-TAMIAMI TRAIL 2.3 STREET ADDRESS PORT CHARLOTT FL 33952 CITY-ST-ZIP 2 4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Change Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Addition 4.1 TITLE Change TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition 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 or an attachment with an address.