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

PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham FILED ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 98 NOV -2 AM 9: 17 DOCUMENT # P93000038133 (3) SECRETARY OF STATE TALLAHASSEE, FLORID NETSOL, INC. Principal Place of Business Mailing Address NETSOL INC. NETSOL INC 870 NE 111 ST -870 NE 111-ST. DO NOT WRITE IN THIS SPACE MIAMILEL 33561 -MIAMI-FL 33161 US... 3. Date incorporated or Qualified -211 05/27/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 123 SE BR AVE 65-0503759 26 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & : 6. Election Campaign Financing \$5.00 May Be WIA 23 Trust Fund Contribution Added to Fees 28 Country Country 8. This corporation owes or has paid the current year Intangible 33/3/ 24 DADE ☐ Yes 25 29 30 Personal Property Tax due June 30, 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent MILIAN, MARIA 870 NE 111 ST. 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33161 83 84 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) 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS TITLE DELETE 1.1 TITLE Change Addition DVST MILIAN, ONELIO J 1.2 NAME 1269— 01039—004 NAME R2E034 102684 11/10/98-870 NE 111TH ST STREET ADDRESS 1.3 STREET ADDRESS ****150.00 ****150.00 MIAMI FL 33161 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE 2.1 TITLE Change Addition TITLE MILIAN, MARIA 2.2 NAME NAME STREET ADDRESS 870 NE 111 ST. 2.3 STREET ADDRESS MIAMI FL 2 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 32 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change □ Addition TITLE 5,1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST-ZIP TITLE DELETE 6.1 TITLE Change Addition NAME. 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP 14. Thereby certify that the information supplied with this filling 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. MATURE REQUIRED SIGNATURE --

REINA E GONZALEZ 611 NW 20TH AVENUE MIAMI, FLORIDA. 33125 TELEPHONE 305 644 1471 FACSIMILE 305 631 9796

2

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATION PO BOX 6327 TALLAHASSEE, FLORIDA 32314

DEAR SIRS/MADAMS,

AS PER MY CONVERSATION WITH ANDY ON OCTOBER 7TH, 1998, AT 2.37PM.

MY CLIENT -NETSOL INC., MOVED 2 TIMES.

THIS ANNUAL REPORT RECEIVED 2 DAYS AGO. FOLLOWING ANDY'S INSTRUCTIONS, I

HAVE ENCLOSED THE ANNUAL REPORT, A CHECK FOR \$150.00.

NETSOL CORP., WAS NOT AWARE THEY HAD TO FILE THIS REPORT-

THANKING YOU IN ADVANCE FOR YOUR COOPERATION, I REMAIN

SINCERELY YOURS

KEINA E GONZÁLEZ PUBLIC ACCOUNTANT