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BOCA RATON FL 33432 US

PROFIT CORPORATION ANNUAL REPORT

1998

DOCUMENT #

BOCA RATON FL 33432



FLOHIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Jan 16 1998 8:00am Secretary of State

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

DIGITAL NETWORK SERVI	CES, INC.	
Principal Place of Business	Mailing Address	
2 E CAMINO REAL STE 113	2 EAST CAMINO REAL SUITE 113	DO NOT WEITE IN THE SPACE

							07/16/1993			or the second se
<ol><li>Principal Pl</li></ol>	lace of Business	2a. Mailing Address					4. FEI Number			Applied For
21		26				1	65-0429005			Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	747 hr = 1 = 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					r1	\$8.75	Additional
22		27				l l	5. Certificate of Status Desired			Required
City & State	3	City & State					6. Election Campaign Financing		¢5 A	O May Be
23		28				}	Trust Fund Contribution			о мау ве d to Fees
Zip	Gountry	Zip	200	intry			. 7.22		- 12-12-12-12-12-12-12-12-12-12-12-12-12-1	
remedical		- January	<u> </u>	ar Ita y		i	8. This corporation owes of has pa	P***		
24	25	[29]	30	7			Parsonal Property Tax due June 10. Name and Address of New Re			□ No
	9. Name and Address of Currer	it Hegistered Agent		541			(U. Name and Address of New Me	agistered A	gent	
JOHNSON, GEORGE F			81	Name						
651 SOUTHWEST JUNEBERRY COURT BOCA RATON FL 33486			82 Street Address (P.O. Box Number is Not Acceptable)							
			Ser Strong Political In Co. Con Harrison in the Proceptions							
BOOK PATON PL 33400		83						Afterna Contract of the Contra		
				84	City			FI.	85 🕮	o Code
77	Action of the control	A STATE OF THE STA							حسلبا	
11. Pursuant t	to the provisions of Sections 607,050 egistered agent for both, in the State	ig and 607.1508, Figrida Stati, of Florida, Such change was	ites, the a	paye d by	:-named co	corpora oration	tion submits this statement for the part of directors. I hereby access	purpose of a	nanging intment a	its registered :
agent, I ar	n familiar with, and accept the oblig-	ations of, Section 607.0505, F	iorida Sta	tutes		2.00.001	a received of an extension of the received	tre wile suppe	110110111111111111111111111111111111111	to region in
SIGNATURE										
SIGNATORIC	Signature, typed or printed name of registered aga	ant and title if applicable (NC	TE Registers	d Age	nt signature rec	required w	hen minstating)	CALE		
12.	OFFICERS AN	D DIRECTORS	13.		_		ADDITIONS/CHANGES TO OFFIC	CERS AND	DIRECTO	DRS IN 12
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NAME	JOHNSON, GEORGE F		1.2 N	AME	[					j
STREET ADDRESS	651 SOUTHWEST JUNEBERR	OV COLIDT	W		ADDRESS					1
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NAME	JOHNSON, LINDA A		∰ 32 N	AME	1					
STREET ADDRESS	651 SOUTHWEST JUNEBERR	Y COURT	239	REEL	ADDRESS					
CITY-ST-ZIP	BOCA RATON FL 33486		2 40	ITY-5	F-ZiP					
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14. I hereby ce	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									e information
officer or d	firector of the covoration or the rece	eiver or trustee empowered to	eurate and execute t	u u≀a his ro	eport as re	ature si 'eguirer	f by Chapter 607, Florida Statutes:	and that my	л vam; u / name a:	ppears in
officer or director of the copyration 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.										