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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Morthsym

Secretary of State
DIVISION OF CORPORATIONS

## FILED Jun 04 1998 8:00am Secretary of State

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DO NOT WRITE IN THIS SPACE

1990		DIVISION OF CONFORMIONS
DOCUMENT # P	93000061	1366 (9)
CITI NETWORK, INC.		
Principal Place of Business	Mail	ıng Address
7523 ALOMA AVE SUITE 205 WINTER PARK FL 32792	SUF	3 Aloma ave Te 205 ITER Park Fl. 32792

40		00		09/02/1993		
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For	
n 3597	2 Arma Ave	26 3592 A/C	me AUR	59-3197182	Not Applicable	
	#. etc.   <b>te</b>	Suite. Apt #, etc 20	S	<b>5.</b> Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	nter Park 1-1	City & State  Winter Pa	IK FC	6. Election Campaign Financing  Trust Fund Contribution	\$5.00 May Be Added to Fees	
7 Zip2 >-	Country	「 Zp マンフCへ F	Country	8. This corporation owes or has paid the curr	- · - · I	
$\frac{4}{20}$	9. Name and Address of Current	29 50/90/30		Personal Property Tax due June 30.  10. Name and Address of New Registered A	Yes No	
DAI	ASCHAK, JAMES G	negistered Agent	81 Name	10. Harrie Bild Addiess of Hear Hegistered P	-9enr	
	O OTISCO WAY		82 Street Address (P.O. Box Number is Not Acceptable)			
	FIER SPGS. FL 32708					
****	17E1 G GG. 1 E G2700		83			
					<b>T</b>	
			84 City	FL	85 Zip Code	
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	, the above named co	rnoration submits this statement for the nurrouse of	changing its registered	
office or re agent. Lar	egistered agent, or both, in the State o m familiar with, and accept the obligati	f Florida. Such change was aut ions of Seation 607.0505, Florid	horized by the corpora da.Statutes.	ation's board of directors. I hereby accept the appoint	ointment as registered	
SIGNATURE	Man ort Buil	anh	James	G. Bulaschile		
	Signature typed or printed natue of registered agent	and otte if applicante (NotE F	leg-stered Agent signature req	uired when reinstating) DATE	·	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	DRU	[ ] DETELE	1.1 TILE		Change Addition	
NAME	BALASCHAK, JAMES G		12 NAME			
STREET ADDRESS	1780 OTISCO WAY		1.3 STREET ADDRESS			
CITY-ST-ZIP	WINTER SPGS. FL		1.4 CITY - ST - ZIP			
TITLE	DS	DELETE	2 1 TITLE		Change	
NAME	BALASCHAK, DEBORAH S		2 2 NAME		ļ	
STREET ADDRESS	1780 OTISCO WAY		2 3 STREET ADDRESS			
CITY - ST - ZIP	WINTER SPRINGS FL 32708	DELETE	2 4 CITY-ST-ZIP		Channe D Addition	
TITLE		ר ו מנונונ	3.1 TITLE		Change Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS		i	
CITY-ST-ZIP		DELETE	3 4. CiTY - ST - ZiP 4 1 TITLE		Change Addition	
TITLE NAME			4.1 IIILE 4.2 NAME		Grange Mudiffoli	
1			4.2 NAME 4.3 STREET ADDRESS			
STREET ADDRESS						
CITY-ST-ZIP		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition	
NAME		- vectit	52 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY - ST - ZIP			
TITLE		DELETE	6.1 TITLE		Change Addition	
NAME		<u> </u>	62 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP			
U111-31-2P			0.4 U117 - 51 - ZIP			

14. Thereby 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 logal 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:

James 6. Balaschat

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