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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #
1. Corporation Name P93000062721 (4)

ESLEY O'CONNELL

AKE WORTH, FL 33467

7273 WINDER CT.

ROSNET, INC.

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

FILED Feb 11 1998 8:00am Secretary of State

Change

Change

Addition

Addition

Principal Place of Business Mailing Address						- a thurinda iyo ibiob iini mais abit abit abit abit abit abit ini tabu ilabi iibi tabu				
7351 TILLMAN DR. LAKE WORTH FL 33467 US		7351 TILLMAN DR LAKE WORTH FL 33467 US			DO NOT WRITE IN THIS SPACE					
						3. Date Incorporated or Qualified				
A 500-00-00	Place of Business	1 = 14-11-14-14-1				09/02/1993		1 1		
	2a. Mailing Address				4. FEI Number			Applied For		
	JOG RD.	26 6169 JOG R	OHD) <u></u>		59-3222425		_	Not Applicable	
	C-5	Suite, Apt. #, etc. 27 UNIT C- 5	27 UNIT C-5			5. Certificate of Status Desired		, -	5 Additional Required	
City & Stat	WORTH FL	City & State 28 LAKE WOR	9			Election Campaign Financing Trust Fund Contribution	X	,	O May Be d to Fees	
24 334	67 25 USA	Zip 29 3346つ 3	Countr			8. This corporation owes or has p				
24 30 0	- · · · · · · · · · · · · · · · · · · ·		0 05	, (1)		Personal Property Tax due Juni 10, Name and Address of New Ri			∐ No	
9, Name and Address of Current Registered Agent						10. Hanne Blid Address DI Hew H	ağıstaran Mğı	BIIL		
Tinsley, Steven R ESQ.				Name	в					
1005 EMMET ST.				2 Stree	l Addres	ess (P.O. Box Number is Not Acceptable)				
KISSIMMEE FL 34741				ļ <u>.</u>						
			84	City			FL	85 Z	p 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 against and title if applicable (NOTE Registered Agent's gnature required when reinstating) DATE										
12. OFFICERS AND DIRECTORS			13.				200 INI 20			
TITLE	D PRESIDENT	DELETE	1.1 TITLE		Т	ADDITIONS/CHANGES TO OFFE		Change		
NAME	BARBER, RAYMOND J						_	, onang	J 1.00.1.0.1	
					. 1					
STREET ADDRESS	, , , , , , , , , , , , , , , , ,			1.3 STREET ADDRESS						
CITY-ST-ZIP	LAKE WORTH FL 33467			1.4 CITY-ST-ZIP			· -	Change	e Addition	
TITLE	BR. VICE PRESID	ENT LI DECER	2.1 TITLE				_	, change	s LI AUUIIION	
NAME				2.2 NAME						
STREET ADDRESS				2.3 STREET ADDRESS						
CITY-ST-ZIP	LAKE WORTH, FL 33467		2.4 CITY-ST-ZIP							
TITLE	VICE PRESIDENT TECH SERVICES		3.1 TITLE				L	} Change	e 🔲 Addition	
NAME	I NODREW MARKED			3.2 NAME						
STREET ADDRESS	DORESS 7351 TILLMON DR.			3.3 STREET ADDRESS					,	
CITY-ST-ZIP	LAKE WORTH, FL 33467			3.4. CITY-ST-ZIP						
TITLE	VICE PRESIDENT	l octor	4.1 TITLE					Change	Addition	

6.4 CITY - ST - ZIP 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 on an attachment with an address.

4.2 NAME

51 TITLE

52 NAME

6.1 TITLE

6.2 NAME

DELETE

4 3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

LESLEY J. O'CONNELL 1/2100