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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000066754 (1)

HORN-NET MARKETING, INC.

Principa! Plac 4521 PARKER W PALM BCH	* *	Mailing Address 4521 PARKER AVE W PALM BCH. FL 33405-2801				
					3. Date Incorporated or Qualified 3a. Date of Last Report 09/20/1993 04/08/1996	
2. Principal F	Place of Business	2a. Mailing Address 26			4. FEI Number Applied Fo 65-0437890 Not Applied	
Suite, Apt	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired See Required Fee Required	
City & Stai	te	City & State			Election Campaign Financing \$5.00 May Be     Trust Fund Contribution Added to Fees	
Zip 24	Country 25	Zip <b>29</b>	30 Cour	ntry	8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes	
	<ol><li>Name and Address of Curren</li></ol>	t Registered Agent			10. Name and Address of New Registered Agent	
DEMPSEY, W. GLENN 505 S FLAGLER DR S-1330 W PALM BCH. FL 33401			81 Name 82 Stree 83	Address (P.O. Box Number is Not Acceptable)		
				84 City	FL 85 Zip Code	
agent 1 a SIGNATURE	am familiar with, and accept the oblige  Signal are, typed or printed name of registered age  OFFICERS ANI	nt and tilk: It applicable (NO	orida Stati	леѕ.	ned corporation submits this statement for the purpose of changing its register corporation's board of directors. I hereby accept the appointment as registered abuse required when renstating)  DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	DELETE	1.1 Til	1.6	PD Add	
NAME	HORNER, ROBERT R JR	CJ DELETE	1.2 NA			
	441 N COUNTRY CLUB DR		II		Horner, Robert R Jr.	
STREET ADDRESS	ATLANTIS FL 33462			REET ADDRESS	4521 161861 11701	
CHTY-ST-ZIP TITLE	STD	DELETE	2.1 TIT	Y-ST-ZIP	West Palm Beach, FL 33405	
	HORNER, STEPHANIE B	Jan Steel	2.2 NA		i oranga	
NAME STREET ADDRESS	441 N COUNTRY CLUB DR		1	ime Reet address	ee C	
CHY-ST-ZIP	ATLANTIS FL 33462		•	TY-ST-ZIP	w	
TITLE		DELETE	3.1 TIT	<del></del>	☐ Change ☐ Add	
NAME			3.2 NA			
STREET ADDRESS	1		1	 Reet address	iss	
City - S' - ZiP				TY-\$T-ZIP		
TITLE		☐ DELETE	4.1 T/I		Change Add	
NAME			4. 2 N/	AME		
STREET ADDRESS	Į.		4.3 ST	REET ADDRESS	ss	
CITY - S1 - ZIP	L		4.4 CII	IY-ST-ZIP		
THLE		☐ DELETE	5.1 113	LE	☐ Change ☐ Ado	
NAME			5.2 NA	ME		
\$18EE1 ADDRESS			5.3 ST	reet address	SS	
CITY - S1 - ZIP			5.4 CH	TY-\$T-ZIP		

SIGNATURE:

THLE

NAME

STREET ADDRESS

DELETE

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 14. I do 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 open attackment with an address.

4-15-57 581.658.8900
Davine Prione #

Change

Addition

**FILED** 

Apr 21 1997 8:00am

Secretary of State