

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Northen  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

95 MAY -1 PM 6:45

TALLAHASSEE, FLORIDA

000001486770  
-05/12/95--01136--009  
\*\*\*\*200.00 \*\*\*\*200.00

DO NOT WRITE IN THIS SPACE.

DOCUMENT # P94000000898 (4)

1. Corporation Name

MAGNET COMMUNICATIONS NETWORK, INC.

Principal Place of Business

5722 SOUTH FLAMINGO ROAD  
STE. 304  
FORT LAUDERDALE FL 33330

Mailing Address

5722 SOUTH FLAMINGO ROAD  
STE. 304  
FORT LAUDERDALE FL 33330

3. Date Incorporated or Qualified

01/05/1994

3a. Date of Last Report

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

4. FEI Number

65-0466032

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,  
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

THE LAW FIRM OF LAWRENCE J. SPIEGEL CHRTD  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name

FEINBERG, MYRON

82 Street Address (P.O. Box Number is Not Acceptable)

10374 FAIRWAY ROAD

83

84 City

PEMBROKE LAKES

FL

85 Zip Code  
33026

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 607.0502, Florida Statutes.

SIGNATURE

*Myron Feinberg*

(NOTE: Registered Agent signature required when naming)

DATE

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
P  
FEINBER, MYRON  
STREET ADDRESS  
5722 S. FLAMINGO ROAD STE. 304  
CITY - ST - ZIP  
FORT LAUDERDALE FL 33330

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
P/D ☒ Change ☐ Addition

1.2 NAME  
FEINBERG, MYRON

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(2)(b), 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.

SIGNATURE:

*Myron Feinberg*

MYRON FEINBERG

3-14-95 (305) 432-4326

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Telephone Number