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Mailing Address

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

May 09 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

Principal Place of Business

SIGNATURE

DOCUMENT # P9400000898 (4)

MAGNET COMMUNICATIONS NETWORK, INC.

5722 SOUTH FLAMINGO ROAD 5722 SOUTH FLAMINGO ROAD STE. 304 STE. 304 FORT LAUDERDALE FL 33330-3208 FORT LAUDERDALE FL 33330 3. Date Incorporated or Qualified 3a. Date of Last Report 01/05/1994 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0466032 21 26 Not Applicable Suite. Apt. #. elc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Z_{ip} Country Zip This corporation has liability for intangible tax under s. 199.032, Yes No 24 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name FEINBERG, MYRON 10374 FAIRWAY RD. 82 Street Address (P.O. Box Number is Not Acceptable) PEMBROKE LAKES FL 33026 83 64 City Zip 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 Signarize typed or proted name of registered agent and title If applicable. (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) 12 13. DELETE Change Addition PD 1.1 TITLE THLE FEINBERG, MYRON NAME 1.2 NAME 5722 S. FLAMINGO ROAD STE. 304 1.3 STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 1.4 CITY - ST-ZIP CITY - ST - ZIF DELETE 2.1 TITLE Change Addition TITLE **BROMBERG, PETER** 2.2 NAME NAME 5722 S. FLAMINGO RD. STREET ADDRESS 23 STREET ADDRESS FT. LAUDERDALE FL 3330 2 4 CITY-ST-ZIP DITY-ST-Z-P DELETE Channe Addition 3.1 TITLE TITLE ATKIN, THOMAS J 3 2 NAME NAME 5722 S. FLAMINGO RD. 3.3 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL 3.4. CITY-ST-ZIP CITY-ST-ZIE DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 44 CITY-ST-ZIP CITY-ST-7IP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** City - St - ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE 62 NAME NAME **6.3 STREET ADDRESS** STREET ADDRESS 64 CITY-ST-ZIP CHY-\$1-76

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 eath; 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 12 or Block 12 or on an attachment with an address.