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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

May 15 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P94000009711 (0)

ACCOUNTING BUSINESS TOOLS FOR NETWORKING, INC.

•						
Principal Place of Business Mailing Address					IIII BOIN GOID IONA IDDONAIS	JEI HEI IER
16969 NW 67 AVE 16969 NW 67 AVE				ł		
SUITE 201 SUITE 201						
MIAMI FL 33015 MIAMI FL 33015				DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualified 01/21/1994		
_ '	Place of Business	2a. Mailing Address		4. FEI Number		plied For
21	4.	26	·	65-0490204		ot Applicable
Sulte, Api		Suite, Apt. #, etc.		5. Certificate of Status Desired	□ \$8.75 A	
City & Sta	ate	City & State		6. Election Campaign Financing	\$5.00	
23 Zip	Country	28 Zip	Country	Trust Fund Contribution	Added t	
	25	29	30 Country	8. This corporation owes or has pa Personal Property Tax due June	_ ~	angible No
24]	9. Name and Address of Curre		[30]	10. Name and Address of New Re		/
V	/URTENBERG, KENNETH		81 Name			
10000 NN/ 07 AVC				(50 5H) EH	-14)	
	UITE 201		82 Street Add	ress (P.O. Box Number is Not Acceptat)IB)	
MIAMI FL 33015			83			
			84 City		FL 85 Zip (Code
44 Pureuan	to the provisions of Sections 607.05	02 and 607 1508 Florida Statut	os the above named corr	poration submits this statement for the p		e registered
office or	registered agent, or both, in the Stat	e of Florida. Such change was	authorized by the corpora	tion's board of directors. I hereby accep	of the appointment as	registered
agent.i	am familiar with, and accept the oblig	gations of, Section 607.0505, FR	onda Statutes.			
SIGNATURE	Signature, typed or printed name of registered as	ount and little if applicable (NOT	E. Registered Agent signature requi	ired when reinstaling)	DATE	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTOR	S IN 12
TITLE	D	DELETE	1,1 TITLE		Change	Addition
NAME	WURTENBERG, KENNETH		1.2 NAME			
STREET ADDRESS			1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33015		1.4 CITY - ST - ZIP			
TITLE		☐ DELETE	2.1 TITLE		Change	L. Addition
NAME			2.2 NAME			
STREET ADDRESS			2 3 STREET ADDRESS			
CITY-ST-Z#P		Deter	2. 4 CITY-ST-ZIP			T Adde
TITLE		☐ DELETE	3.1 TITLE		L_ Change	☐ Addition
NAME			3.2 NAME			İ
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP TITLE	 	DELETE	3.4. CITY - ST - ZIP 4.1 TITLE		Change	☐ Addition
NAME			4. 2 NAME		Onlingo	
STREET ADORESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY - ST - ZIP			
TITLE		DELETE	5.1 TITLE		Change	Addition
NAME			52 NAME		-	
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		DELETE	6.1 TITLE		Change	Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP			
14. I hereby	certify that the information supplied	with this filing does not qualify f	or the exemption stated in	Section 119.07(3)(i), Florida Statutes. I	further certify that the	information
officer of Block 12	r director of the corporation of the rec ? or Block 13 if changed, or on an att	ceiver or trustee empowered to achment with an address.	execute this report as req	puired by Chapter 607, Florida Statutes;	and that my name app	pears in