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PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #	P94000012472	(4)
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1. Corporation	MENT# P9400 n Name HTONE NETWORK, INC.	00012472 (4	1)				
3550 BISCAYNE BLVD STE. 705 3550 BI		Mailing Address 3550 BISCAYNE BLVI MIAMI FL 33137	BISCAYNE BLVD., STE. 705		T TO STAND IN THE SELLING BOTH OF THE SELLING BOTH	4 00 187 80 101 14010 71011	04041 10010 T(0) 1881
	•••	MINMITE GGIGT			3. Date Incorporated or Qualified 02/15/1994	3a. Date of Las 08/15/	
	ace of Business	2a. Mailing Address			4. FEI Number	J	Applied For
21 Cuito Ant	# ata	26			65-0474602	1	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired		.75 Additional ee Required
City & State		Cily & State			Election Campaign Financing Trust Fund Contribution		.00 May Be
Ζφ 24	Country 25	29 30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No.		
	9. Name and Address of Currer	it Registered Agent			10. Name and Address of New R	egistered Agent	
GDOSSI	FELD, KENNETH		81	Name			
	SCAYNE BLVD., STE. 705		82	Street Add	dress (P.O. Box Number is Not Acceptable)		
	L 33137		83				· · · · · · · · · · · · · · · · · · ·
			84	,		FL 85	Zip Code
familiar wit	th, and accept the obligations of, Sect Signature, typed or printed name of registered agent	on 607.0505, Florida Statutes	Ted by the corp.	oration's boa		intment as registe	red agent. I am
12.	OFFICERS AND	D DIRECTORS DELETE	13.	· ₁	ADDITIONS/CHANGES TO OFF		
NAME	GROSSFELD, KENNETH	_ bitti	1. 1 TITLE 1.2 NAME			Chan	ge 🔲 Addition
STREET ADDRESS	3550 BISCAYNE BLVD., STE.	705	1.3 STREET	22 19004			
CITY - ST - ZIP	MIAMI FL 33137		14 CITY-S				
T-TLE		☐ DECETE	2 1 11111.6	····		Chan	ge Addition
NAME			2.2 NAME			-	
STREET ADDRESS			23 STREET	ADDRESS			
CITY - \$1 - ZIP			2.4 C-TY - S	- ZIP			
TIBLE		[] DELETE	3 1 TITLE			☐ Chan	ge 🔲 Addition
NAME STREET ADDRESS			3.2 NAME				
CITY-ST-ZIP			3.3 STREET	ŀ			
TITLE		☐ DELETE	3.4 CHTY - SI 4. 1 THILE	- ZIP		Chang	no ET Addition
NAME		<u></u>	4.2 NAME			[] c.aut	ge 🔲 Addition
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-S1-ZIP			4.4 CITY - ST				
TILLE		DELETE	5 1 THILE			Chang	ge 🔲 Addition
NAME			5.2 NAME				
STREET ADDRESS			5 3 STREET	ADDRESS			-
CITY-S1-ZIP	· · · · · · · · · · · · · · · · · · ·		5 4 City - S1	- ZIP			
THLE		☐ DELETE	6 1 TITLE			☐ Chang	e Addition
NAME OAREST ARERESO			6 2 NAME	f			
STREET ADDRESS			6.3 STREEL				
CHY-ST-ZIP			6.4 CITY - ST	- 7IP			

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(3)(k). 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 12 or

SIGNATURE:

KANNETH GROSSFELD 3.21.96 305.576.6/16