

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

FILED

May 14 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P94000027965 (0)

1. Corporation Name

REAL ESTATE SERVICES NETWORK HOLDING CORP.



Principal Place of Business

3200 MILITARY TRAIL  
STE 300  
BOCA RATON FL 33431  
US

Mailing Address

3200 MILITARY TRAIL  
STE 300  
BOCA RATON FL 33431-6343  
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

3. Date Incorporated or Qualified

04/12/1994

3a. Date of Last Report

05/01/1996

4. FEI Number

65-0486384

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

JOSEPH L LENTS  
3200 N MILITARY TRAIL  
SUITE 210  
BOCA RATON FL 33431

10. Name and Address of New Registered Agent

81 Name  
FRANCESCO MORELLO  
82 Street Address (P.O. Box Number is Not Acceptable)  
REAL ESTATE SERVICES NETWORK HOLDING CORP.  
83 3200 N. MILITARY TRAIL, SUITE 300  
84 City  
BOCA RATON FL 85 Zip Code  
33431

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

Francesco Morello

04/30/97

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD LENTS ☒ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP  
3200 MILITARY TRAIL, SUITE 210  
BOCA RATON FL

TITLE VPST ☒ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MURPHY, LORETTA  
3200 MILITARY TRAIL, SUITE 210  
BOCA RATON FL

TITLE D ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MORELLO, FRANCESCO  
3200 N MILITARY TRAIL, SUITE 300  
BOCA RATON FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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 on an attachment with an address.

SIGNATURE

Francesco Morello 04/30/97 (561) 388-5000

CR2E034 (9/96)