FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

FILED
1995 AUG -3 AM 9:18
TALLAHASSEE, FLORIDA

DOCUMENT # P94000052611 (8)

1. Corporation Name
DATAXCHANGE NETWORK, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
1212 NORTH HERCULES AVENUE CLEARWATER FL 34625	1212 NORTH HERCULES AVENUE CLEARWATER FL 34625

3. Date Incorporated or Qualified: 07/06/1994
3a. Date of Last Report:

2. Principal Place of Business — 21
2a. Mailing Address P.O. Box 5372 — 26 Clearwater, FL 34618
Suite, Apt. #, etc. — 22
Suite, Apt. #, etc. — 27
City & State — 23
City & State — 28 Clearwater, FL
Zip — 24
Country — 25
Zip 34618 — 29
Country — 30

4. FEI Number: 59-3239095 ☐ 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

GOLDMAN, DAVID S
1212 NORTH HERCULES AVENUE
CLEARWATER FL 34625

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☒ Change ☐ Addition
NAME	GOLDMAN, DAVID S	12 NAME	
STREET ADDRESS	POST OFFICE BOX 4627 N/A	13 STREET ADDRESS	~~P.O. Box 5372~~, 1212 N. Hercules Ave.
CITY-ST-ZIP	CLEARWATER FL 34618	14 CITY-ST-ZIP	Clearwater, FL 34625
TITLE	D	21 TITLE	☒ Change ☐ Addition
NAME	LAUGHLIN, ROBERT	22 NAME	
STREET ADDRESS	POST OFFICE BOX 4627 N/A	23 STREET ADDRESS	~~P.O. Box 5372~~ 1212 N. Hercules Ave.
CITY-ST-ZIP	CLEARWATER FL 34618	24 CITY-ST-ZIP	Clearwater, FL 34625
TITLE	D	31 TITLE	☒ Change ☐ Addition
NAME	PIASECKI, MICHAEL M	32 NAME	
STREET ADDRESS	POST OFFICE BOX 4627 N/A	33 STREET ADDRESS	Delete
CITY-ST-ZIP	CLEARWATER FL 34618	34 CITY-ST-ZIP	
TITLE	D	41 TITLE	☒ Change ☐ Addition
NAME	CORAZZI, SYLVAN R	42 NAME	
STREET ADDRESS	POST OFFICE BOX 4627 N/A	43 STREET ADDRESS	~~P.O. Box 5372~~ 1212 N. Hercules Ave.
CITY-ST-ZIP	CLEARWATER FL 34618	44 CITY-ST-ZIP	Clearwater, FL 34625
TITLE		51 TITLE	T ☐ Change ☒ Addition
NAME		52 NAME	Saporta, Doug
STREET ADDRESS		53 STREET ADDRESS	~~P.O. Box 5372~~ 1212 N. Hercules Ave.
CITY-ST-ZIP		54 CITY-ST-ZIP	Clearwater, FL ~~34618~~ 34625
TITLE		61 TITLE	S ☐ Change ☒ Addition
NAME		62 NAME	Redman, Rita
STREET ADDRESS		63 STREET ADDRESS	~~P.O. Box 5372~~ 1212 N. Hercules Ave.
CITY-ST-ZIP		64 CITY-ST-ZIP	Clearwater, FL ~~34618~~ 34625

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)(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: Rita Redman Rita Redman 5/28/95 (813)443-0244
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0360002 CP