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

Mailing Address

200 GALEN DRIVE

APT 109

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

May 13 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

Principal Place of Business

200 GALEN DRIVE

APT 109

DOCUMENT # P94000080243 (6)

GENERAL NETWORKS DYNAMICS, INC.

APT 109 KEY BISCAYNE US	FL 33149	APT 109 KEY BISCAYNE FL 33149-2107 US	7		11/01/1994 04	Date of Last Report / 08/1996
1 - 1 - 1	ACE 25TH ROAD	2a. Mailing Address 26 50 S.E 25	TH.	ROA	4. FEI Number 65-0533797	Applied For Not Applicable
Suite, Apt 22 8 B	#, etc.	Suite, Apt. #, etc.	9, Apt. #, etc.		6. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	MI FL	City & State		FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
^{Zip} 331	129 Country	Zip 33 12 9 30	Country		The state of the s	IN₀
	B, 1101110 and 11001000 01 0011011	Registered Agent	81		10, Name and Address of New Registered	Agent
CORPORATION SERVICE COMPANY				Name		
1201 HAYS ST. TALLAHASSEE FL 32301			82	Street	Address (P.O. Box Number is Not Acceptable)	
"-			83			
			84	City	F.	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	Signature, typed or printed name of registered agent	and title if applicable /NOTE B	noistered Ace	ot elaneture	a required when reinstating) DATE	
12.	OFFICERS AND		13.	a to grantine	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE		PD	Change
NAME	Przemyslaw, Karwasiecki		1.2 NAME		PRZEMYSLAW KARWASIECK	•
STREET ADDRESS	200 GALEN DRIVE APT 109		1.3 STREET	ADDRESS	150 SE. 25 TH ROAD # 81 MIAMI FL 33129	>
City-St-Zie	KEY BISCAYNE FL	,	1.4 CITY-S	T-ZIP	MIAMI FL 33129	
TiTLE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	☐ DELETE	21 TITLE			Change Addition
NAME			22 NAME			
STREET ADDRESS			2.3 STREET	ADDRESS		
CITY S1-ZIP			2.4 CITY-	ST-ZIP		
PITLE		☐ DELETE	31 TITLE			Change Addition
NAME			32 NAME			
STREET ADDRESS			3.3 STREET	ADDRESS		
CITY'-ST-ZIP			3.4. CITY-	ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		1	Change Addition
NAME			4. 2 NAME			
STREET ACKRESS			4.3 STREET	ADDRESS		
CITY-ST-7:P			4.4 CITY-S	T-ZIP		
TITLE		☐ DELETE	5.1 TITLE			Change Addition
NAME			52 NAME			•
STREET ADDRESS			5.3 STREET	ADORESS		
CITY - \$1 - 7/P			5.4 CITY-S	T-ZIP		
TITLE		☐ DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME			
STREEL ADDRESS			6.3 STREET	ADDRESS		
1 1					Ì	

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