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

Mailing Address

150 SE 25TH RD

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

150 SE 25TH RD

CITY - ST - ZIP

SIGNATURE:



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 24 1998 8:00am

Secretary of State

(305) 856 9433

3/31/98

Secretary of State DIVISION OF CORPORATIONS

P94000080243 (6) DOCUMENT #

GENERAL NETWORKS DYNAMICS, INC.

DO NOT WRITE IN THIS SPACE MIAMI FL 33129 MIAMI FL 33129 3. Date Incorporated or Qualified 11/01/1994 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 65-0533797 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees 23 Country Zip Country Zip 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 30 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name PRZEMYSLAW CORPORATION SERVICE COMPANY KARWASIECKI 1201 HAYS ST. Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301 83 City 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 far illian with, and accept the obligations of, Section 607.0505, Florida Statutes. KARWASIECUI SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. DELETE 1.1 TITLE NAME PRZEMYSLAW, KARWASIECKI 1.2 NAME 150 SE 25TH RD., #8B STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CiTY-ST-ZIP 1.4 CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change ■ Addition 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CHTY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - ZIP __ Addition Change DELETE 5.1 THLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6 4 CITY - ST - ZIP

14. Thereby 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 of 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 of an attainment with an address.