Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90063 005 ***158.75

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secret 3ry of State DIVISION OF CORPORATIONS

DOCUMENT # **P94000080243**

1. Corporation Name

GENERAL NETWORKS DYNAMICS, INC.

Principal P ac	e of Business		Mailing Address									
150 SE 25TH RD			150 SE 25TH RD				İ					
8B			8B				1					
MIAMI FL 30129			MIAMI FL 33129				_	DO NOT WRITE IN THIS SPACE				
บร		US						porated or Quali	fed			
								11/01/19				
2. Principal P	lace of Business		2a. Mailing Address					4. FEI Numbe				pr lied For
21			26					<u>65-0533</u>	7 97		N	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				1	E Cortifoato	of Status Desire			A iditional	
22								J. Certifoxic	DI Cialas Besire	<u>~</u> ~	Fee R	tequired
City & Stat	e	City & State					6. Election Ca	_ ampaign Financ	ing _	\$5.00	May Be	
			28						I Contribution	Li	Added	to Fees
Zip	Cour t	ry	Zip Country				8. This corpo	ration owes the	current year	ntangible	1	
24	25		29 30						roperty Tax.		Yes	ANO
	9. Name and Addr	ess of Current	Registered Agent		T			10. Name and	Address of Ne	w Registere	d Agent	
					81	Nan	me					
Karwasiecki, Przemyslaw						<u> </u>		- (5.0.5				
150 SE 25TH ROAD			82			Stre	eet At dress	is (P.O. Bo) Nu	mber is Not Acc	eptable)		ľ
#8B			•			 		•	_			
MIAMI FL 33129			!			Ì						
******					84	City	y	·		F	L 85 Zip	C ode
11. Pursuant	to the provisions of Se-	ctions 607.0502	and 607.1508, Florida Statu	tes, the	abov	e-nam	ned ccrpora	ation submi s th	is statement for	the purpose	of changing it	s registered
office cri agent. i a	egistered agent, or boil im familiar with, and acc	h, in the State of cept the obligation	and 607.1508, Florida Stati Florida. Such change was ons of, Section 607.0505, Fl	aut iro riz orid i o 6ta	ed by States	the co	orporation's	s board of direct	tors. I hereby a	ccept the app	ointment as r	eg stered
SIGNATURE	PRZEHYSLAU		SIECKI	- ₹.	\mathcal{M}^{A}	\sim	~~~	~		04/19	199_	
	Signature, typed or printed na			: Register	ed Ager	nt signat	ture required wh	hen reinstating)		/DATE		
12.		OFFICERS AND		13				ADDITIONS	CHANGES TO	OFFICERS		
TITLE	PD		☐ DELETE	1.1	TITLE						Change	☐ Addition
NAME	, przemyslaw, ka	RWASIECKI		1.2	NAME							
STREET ADDRESS	150 SE 25TH RD.,	#8B		1.3	STREE	TADDRE	ESS					
CITY-ST-ZIP	MIAMI FL			1.4	CITY-S	T-ZIP						
TITLE			☐ DELETE	2.1	TITLE						Change	☐ Addition
NAME				2.2	NAME		ļ					
STREET ADDRESS				2.3	STREE	T ADDRE	ESS					
CITY-ST-ZIP				2	CITY-S	ST-ZIP						
TITLE	 		☐ DELETE		TITLE						☐ Change	☐ Addition
NAME					NAME							
						T ADDRE	Eee					
STREET ADDRESS					-		[33]					
CITY-ST-ZIP			☐ DELETE		CITY-S	51-ZIP					Change	Addition
TITLE			□ nerale									
NAME)				NAME		İ)
STREET ADDRESS						T ADDRE	ESS					
CITY-ST-ZIP					CITY-S	T-ZIP						
TITLE			☐ DELETE		TITLE						Change	Addition
NAME					NAME							
STREET ADDRE IS				5.3	STREE	T ADDRE	ESS					į
CITY-ST-ZIP				5.4	CITY-S	T-ZIP						
TITLE			☐ DELETE	6.1	TITLE						Change	☐ Addition
NAME				62	NAME							
STREET ADDRESS	1			6.3	STREE	TADDRE	ESS					
CHALL MOUNT N	1						1					

14. I 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 by on an attachment with an address, with a lother like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP