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

PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400082798 (7)

GULFNET TECHNOLOGIES DESTIN, INC.

Principal Place of Business Mailing Address 707 HWY 98. E 707 HWY 98. E SUITE H SUITE H DESTIN FL 32541 DESTIN FL 32541 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/14/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3277314 21 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. [Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent B1 Name HOLMES, LINDA 300 W. HIGHWAY 98 82 Street Address (P.O. Box Number is Not Acceptable) **DESTIN FL 32541** 83 City 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, typod 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 DELETE 1.1 TITLE Change Addition HOLMES, LINDA NAME 1.2 NAME 3797 MISTY WAY STREET ADORESS 1.3 STREET ADDRESS **DESTIN FL** 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE TITLE 2.1 TITLE ☐ Change Addition HOLMES, LINDA NAME **2.2 NAME 46 COURT DRIVE** STREET ADDRESS 2.3 STREET ADDRESS **DESTIN FL 32541** CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE ☐ Change Addition DYESS, WILLIAM W I NAME 3.2 NAME **563 POCAHONTAS** STREET ADDRESS 3.3 STREET ADDRESS FT. WALTON BEACH FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE Change ___ Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

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, or on an attachment with an address.

5.4 ČITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

0/0100 (-- 0 -- 0 -- 0

☐ Change

☐ Addition

FILED

Mar 26 1998 8:00am

Secretary of State