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

PROFIT CORPORATION ANNUAL REPORT
2000

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

FILED
May 12, 2000 8:00 am
Secretary of State
05-12-2000 90084 011 ***150.00

DOCUMENT # P94000088977

1. Corporation Name
POWERNET INTERNATIONAL, INC

Principal Place of Business
3785 NW 82 AVENUE
SUITE 112
MIAMI, FL 33166

Mailing Address

DO NOT WRITE IN THIS SPACE

21 2. Principal Place of Business

22 Suite, Apt. # etc.

23 City & State

24 Zip 25 Country

26 2a. Mailing Address

27 Suite, Apt. # etc.

28 City & State

29 Zip 30 Country

3. Date Incorporated or Qualified
12/06/94

4. FEI Number
65-0585304
☐ 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 owes or has paid the current year intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

AKERS, ALEXANDER
7375 SW 114 STREET
MIAMI, FL 33156

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 Section 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 duly 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

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
☐ DELETE	☐ Change ☐ Addition
☐ DELETE	☐ Change ☐ Addition
☐ DELETE	☐ Change ☐ Addition
☐ DELETE	☐ Change ☐ Addition
☐ DELETE	☐ Change ☐ Addition
☐ DELETE	☐ Change ☐ Addition

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 report or supplemental requirement is true and accurate and that my electronic 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 added to the report or on an attachment with an address.

SIGNATURE: _____ 4/27/00 (305) 593-7099
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Area Code & Daytime Phone Number

CR2E034 (10-97)