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

PRQFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

Jun 04 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000003789 (1)

NETLINE COMMUNICATIONS, INC.

14. I do hereby certify that the information supplied with this Ting information indicated on this annual report or supplemental I am an officer or director of the corporation of the receive appears in Block 12 or Block 13 it changed to coran attacks.

| ,   |  | •  |  |  |                                   |
|---|--|--|--|--|-----------------------------------|
| Principal Place of Business                     |  | Mailing Address  |  | I SEBINEEL IND LOND! DONS DOUG ODIN ODIN ODNY DENE   | D ECIES (1881) (1814 TECH 1884    |
|   |  | 3108 GASEY-KEY-ROAD<br>NOKOMIS FL 34275-3360   |  |  |                                   |
|   |  |  |  | 01/13/1995 04/   | Pate of Last Report<br>104/1996   |
| 2. Principal Place of Business 21               |  | 2a. Mailing Address 26   |  | 4. FEI Number 65-0547547   | Applied For<br>Not Applicable     |
| Suite, Apt. #, etc.                             |  | Suite, Apt. #, etc.  | 19   | 5. Certificate of Status Desired   | \$8.75 Additional<br>Fee Required |
| City & State                                    |  | City & State   |  | Election Campaign Financing     Trust Fund Contribution  | \$5.00 May Be<br>Added to Fees    |
| Zip   | Country  | Zip  | Country                                    | This corporation has liability for intangible  |                                   |
| 24  | 25 25 25 25 25 25 25 25 25 25 25 25 25 2                       |  | 30]  |  | No                                |
| 9. Name and Address of Current Registered Agent |  |  | 81 Name                                    | 10. Name and Address of New Registered   | waent                             |
|   | ER, BRADFORD   |  | 81 Name                                    |  |                                   |
| 3108 CASEY KEY ROAD<br>NOKOMIS FL 34275         |  |  | 82 Street Addr                             | ress (P.O. Box Number is Not Acceptable)   | AMIAMI TR                         |
|   |  |  | 83   | V 11 3. 1  | 777                               |
|   |  |  | 84 City                                    | FL   | 85 Zip Code                       |
| 11. Pursuant                                    | to the provisions of Sections 6.7.05                           | 502 and 607.1508, Florida Statutes   | s, the above-named corp                    |  |                                   |
| agent. I a                                      | im familiar with and action the obli                           | gations of, Section 607.0505, Flor   | ida Statutes.                              | poration submits this statement for the purpose of<br>tion's board of directors. I hereby accept the app | IA 1                              |
| SIGNATURE                                       | 1200   | The state of the s | 7  | 4/15   | 171                               |
| 12.   | Signature, typed or printed name of registered a<br>OFFICERS A | ND DIRECTORS   | Hogistered Agent signature requirement 13. | ADDITIONS/CHANGES TO OFFICERS ANI  | D DIRECTORS IN 12                 |
| TITLE   | PO   | DELETE   | 11 DILE                                    | 2108 B V. RO   | Addition                          |
| NAME  | BAKER, BRADFORD  |  | 1.2 NAME                                   | 000  |                                   |
| STREET ADDRESS                                  | 3108 CASEY KEY ROAD  | ox-ob  | 1.3 STREET ADDRESS                         |  |                                   |
| CITY-ST-ZIP                                     | NOKOMIS FL 34275   |  | 1.4 CITY - ST - ZIP                        | Notation 1   | 4                                 |
| TITLE   | SD<br>SHOEMAKER, DAVID   | L. DELETE  | 2.1 TITLE                                  |  | Change Addition                   |
| NAME  | 1380 VENICE AVE EAST   |  | 2.2 NAM[                                   |  |                                   |
| STREET ADDRESS                                  | VENICE FL 37292  |  | 2 3 STREET ADDRESS  2.4 CITY - ST - ZIP    |  |                                   |
| CITY-ST-ZIP<br>TITLE                            | TD   | DELETE   | 3.1 TILE                                   |  | ☐ Change ☐ Addition               |
| NAME  | BRUNELL, DAVID   |  | 3.2 NAME                                   |  |                                   |
| STREET ADDRESS                                  | 1576 FERNGRAN AVE  |  | 3.3 STREET ADDRESS                         |  | ŀ                                 |
| CITY-ST-ZIP                                     | WEST PALM BEACH FL 3341  |  | 3.4. CITY-ST-7IP                           |  |                                   |
| TITLE   |  | ☐ DELETE   | 4.1 TITLE                                  |  | Change Addition                   |
| NAME  |  |  | 4. 2 NAME                                  |  |                                   |
| STREET ADDRESS                                  |  |  | 4.3 STREET ADDRESS                         |  |                                   |
| CITY-ST-ZIP<br>TITLE                            |  | ☐ DELE1E   | 4.4 CITY+ST-ZIP<br>5.1 TITLE               |  | ☐ Change ☐ Addition               |
| NAME  |  |  | 52 NAME                                    |  |                                   |
| STREET ADDRESS                                  |  |  | 5 3 STREFT ADDRESS                         |  |                                   |
| CITY-ST-ZIP                                     | *.   |  | 5.4 CITY - S1 - ZIP                        |  |                                   |
| TITLE   |  | DELETE   | 6.1 TITLE                                  |  | ☐ Change ☐ Addition               |
| NAME  |  |  | 6.2 NAME                                   |  |                                   |
| STREET ADDRESS                                  |  |  | 6.3 STREET ADDRESS                         |  |                                   |

th an address.

not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the report is true and accurate and that my signature shall have the same legal effect as if made under oath; that empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name