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

PROFIT CORPORATION **ANNUAL REPORT**

1997

TITLE NAME

STREET ADDRESS

CITY-ST-ZIP



HIORIDA DEPARTMENT OF STATE

FILED

Mar 14 1997 8:00am

Secretary of State

Change

Addition

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

POCUMENT # P95000039146 (2)

T D B GLOBAL NETWORK, INC. Principal Place of Business Mailino Address 133 N POMPANO BEACH BLVD 133 N POMPANO BEACH BLVD #603 POMPANO BEACH FL 33062 POMPANO BEACH FL 33062-5728 3. Date Incorporated or Qualified 3a. Date of Last Report 05/17/1995 02/27/1996 2. Principal Place of Business 2a. Mailing Address 4. EEL Number Applied For 65-0587873 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Added to Fees 28 Trust Fund Contribution Zip Country Country 8. This corporation has liability for intangible tax under s. 199,032, X Yes 24 25 29 Florida Statutes П No 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 FREDERICKS, DOTTI 133 N POMPANO BEACH BLVD 82 Street Address (P.O. Box Number is Not Acceptable) **#603** 83 POMPANO BEACH FL 33062 84 Zip Code City 85 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 agont, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and the if applicable (NOTE: Registered Agent segnature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) 13. DECEMB Change Addition TITLE 1.1 1000 FREDERICKS, DOTTI 1.2 NAML NAME CR2E034 133 N POMPANO BEACH BLVD #603 STREET ADDRESS 1.3 STREET ADDRESS POMPANO BEACH FL 33062 CITY-ST-ZIP 1.4 CiTY - ST - ZIP DELFIL Change Addition TITLE 21 111116 NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CHY- \$1-7IP DITELL Change Addition TITLE 3 1 1016 NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3 4. CITY - ST - ZIF D DOLLIE Change Addition TITLE 4.1 THEE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CHY-S1-ZIP D DELETE Change Addition TITLE 5.1 1ille 5.2 NAME NAME STREET ADDRESS 5.3 STHEET ADDRESS CITY-ST-ZIP 5.4 C/1Y-S1-2/P

14. I do 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.

6.1 1011

6.2 NAM(

6.3 STHEED ADDRESS

DECETE