FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT
1996

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

DOCUMENT # P95000052471

1. Corporation Name
Home Network, Inc.

Principal Place of Business
Mailing Address

3. Date Incorporated or Qualified: 7/7/1995
3a. Date of Last Report: NA
4. FEI Number: 59-3324180 — ☐ 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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21 17200 Gulf Blvd	26 17200 Gulf Blvd
Suite, Apt. #, etc. 22 105	Suite, Apt. #, etc. 27 suite 105
City & State 23 N. Redington Beach FL	City & State 28 North Redington Beach
Zip 24 33708 Country 25 Pinellas	Zip 29 33708 Country 30 Pinellas

9. Name and Address of Current Registered Agent

Amerilawyer
343 Almeria Ave
Coral Gables, FL 33134

10. Name and Address of New Registered Agent

81 Name: Dan Peters
82 Street Address (P.O. Box Number is Not Acceptable): 17200 Gulf Blvd, Suite 105
83
84 City: North Redington FL 85 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: Daniel Peters, secretary [signature] DATE: 3/25/96
Signature, typed 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	Secretary	☒ DELETE	1.1 TITLE	President & Treasurer	☐ Change ☒ Addition
NAME	Elsie Sanchez		1.2 NAME	Renee Peters	
STREET ADDRESS	343 Almeria Ave		1.3 STREET ADDRESS	17200 Gulf Blvd	
CITY-ST-ZIP	Coral Gables, FL 33134		1.4 CITY-ST-ZIP	No Redington Beach, FL 33708	
TITLE		☐ DELETE	2.1 TITLE	V.P. & Secretary	☐ Change ☒ Addition
NAME			2.2 NAME	Daniel Peters	
STREET ADDRESS			2.3 STREET ADDRESS	17200 Gulf Blvd	
CITY-ST-ZIP			2.4 CITY-ST-ZIP	N. Redington Beach, FL 33708	
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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

SIGNATURE: [signature], secretary — 3/26/96 — 813 399-8452
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)