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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Feb 10 1998 8:00am Secretary of State

1. Corporation Name # P95000054222 (1) THE NET HOUSE, INC					
					())
Principal Plac	e of Business	Mailing Address	·-··-		NI 21010 HOID HOID HOR 1021
415 COX RD.		415 COX RD.			
COCOA FL 32926		COCOA FL 32926		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	01.102
				07/10/1995	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3327404	Not Applicable
Suite, Apt #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	·	6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the cu	
24	25	[29]	30		Yes No
9, Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent 81 Name					Agent
CORNELIUS, OSCAR R 415 COX RD. 82 Street A			00 00 1444	/20 P. M. Harris M. M. M. Harris M. M. M. Harris M. M. M. M. Harris M. M. M. Harris M. M. M. Harris M. M. M. M. Harris M. M. M. M. Harris M.	
	COA FL 32926		82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
	OUNTE GEOFF		83		
			84 City		85 Zip Code
			too the shows samed core	FI	of observing its registered
11. Pursuant to the provisions of Sections 607.09.02 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
_	m familiar with, and accept the obt-	gations of, Section 607.0505, F	lorida Statutes.		
SIGNATURE	Signature: by sold or plinto disasse of registers is a	gentairttifie dappraatie (NO	11 Registered Agent signature requir	red when reinstating) DATE	
12.	OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	D	☐ DELFTE	1 1 TITLE		☐ Change ☐ Addition
NAME	CORNELIUS, OSCAR R		1.2 NAME		`
STREET ADDRESS	3865 CHEROKEE AVE		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	COCOA FL 32926 D	☐ DELETE	1.4 CITY - ST - ZIP 2 1 TITLE		Change Addition
NAME	CORNELIUS, SUZANNE K		2.2 NAME		
STREET ADDRESS	3865 CHEROKEE AVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	COCOA FL 32926		2. 4 CITY - ST - ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		ļ
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3 4. CITY-ST-ZIP 4 1 TITLE		Change Addition
NAME		hand	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		ļ
CITY-ST-ZIP		DELETE	54 City-ST-ZiP 61 TitlE		☐ Change ☐ Addition
TITLE :		_j ottett	6.2 NAME		C creation C Manager
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
14. I hereby o	certify that the information supplied	with this filing does not qualify		Section 119.07(3)(i), Florida Statutes. I further c	ertify that the information

on is industrial and accurate and that my signature shall have the same legal effect as if made under oath; that I am all the empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in an address