SECOND NOTICE CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) **PROFIT** FLORIDA DE PARTMENT OF STATÉ CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 P95000097540 (5) DOCUMENT # INFONET CONCEPTS, INC. Principal Place of Business Mailing Address 343 ALMERIA AVENUE 343 ALMERIA AVENUE CORAL GABLES FL 33134 **CORAL GABLES FL 33134** 3. Date Incorporated or Qualified 3a. Date of Last Report 12/27/1995 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address Not Applicable 1501 Corporate Drive 1501 Corporate Drive 65-0669981 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc 5. Certificate of Status Desired Fee Required #260 #260 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution Boynton Beach, Florida Boynton Beach, Florida 8. This corporation has liability for intangible tax under s. 199 032. 33426 ^{Zip} 33426 USA Yes No 25 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent NameriLawyer Chartered HHEXBAAX KIBIN OEXBAAHENICK AIXENEGER ICHILAD Street Address (P.O. Box Number is Not Acceptable) 343 ALMERIA AVENUE CORAL GABLES FL 33134 Zip Code 84 City 85 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered rida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered by Section 607.0505, Florida Statutes. 11. Pursuant to the provisions of office or registered agent agent landamilin Land 6/10/96 Natalia Utrera, Vice President SIGNATURE By: (NOTE: Required Agent's gosture required (3.6)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OF ICERS AND DIRECTORS 12. 13. 1 1 THE TITLE Clinton Greyling E034 1.2 NAME NAME 1501 Corporate Drive, #260 1.3 STREET ADDRESS STREET ADDRESS Boynton Beach, Florida 33426 1.4 CHTY - ST - ZIP CITY-S1-ZIP Change K Addition DELETE 21 1111.6 TITLE Mary Duncan 2.2 NAME NAME 1501 Corporate Drive, #260 2.3 STREET ADORESS STREET ADDRESS Boynton Beach, Florida 33426 2 4 CITY - ST - ZIP CITY-ST-ZIP Change XX Addition DELETE TITLE 3.1 TiTLE 3.2 NAME Sandra Armstrong NAME 3.3 STREET ADDRESS 1501 Corporate Drive #260 STREET ADDRESS 3.4 CITY - \$1 - ZIP Boynton Beach, Florida 33426 CITY - ST - ZIP Change Addition DELETE 41 THLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 City - ST - ZIP CITY-ST-ZiP Change Addition DELETE 5.1 Hite. TITLE 100001880851 5.2 NAME -07/01/96--01054--019 5 3 STREET ADDRESS STREET ADDRESS ***225.00 5 4 CITY - ST - ZIP CITY - ST - ZIP DELETE 6 1 TITLE TITLE 6.2 NAME

64 CITY-ST-ZIP

14. Too hereby certify that the information supplied with this fring is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). Florida Status 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 noth that I am an officer or director of the corporation or the recover or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Ricch 13 or Ricch 13 or or or an alternative statement with an address. 13 if changed, or on 33 attachment with an address that my name appears in Bloc

63 STREET ADDRESS

Clinton Greyling, Pres.

SIGNATURE:

NAME

STREET ADDRESS

YPEO OF PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

6/10/96 (407) 731-3131