

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

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May 01 1997 8:00am  
Secretary of State

<b>PROFIT CORPORATION</b> <b>ANNUAL REPORT</b> <b>1997</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000006217 (9)**

1. Corporation Name  
**REAL OPPORTUNITY NETWORK, INC.**

Principal Place of Business <b>1321 SOUTH 30TH AVENUE HOLLYWOOD FL 33020</b>	Mailing Address <b>1321 SOUTH 30TH AVENUE HOLLYWOOD FL 33020-5633</b>
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2. Principal Place of Business 21 <b>20121 N.E. 16<sup>th</sup> PL</b> Succ. Apt. #, etc.		2a. Mailing Address 26 <b>2395 Tallahassee</b> Succ. Apt. #, etc.		3. Date Incorporated or Qualified <b>01/18/1996</b>	3a. Date of Last Report
22 City & State <b>Miami, FL</b>		27 City & State <b>Weston, FL</b>		4. FEI Number <b>65-0640493</b>	Applied For Not Applicable
23 Zip <b>33179</b>		28 Zip <b>33326</b>		5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
24 Country <b>USA</b>		29 Country <b>USA</b>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
25 <b>USA</b>		30 <b>USA</b>		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>BARNETT, BRIAN K 1214 N. UNIVERSITY DRIVE PLANTATION FL 33322</b>		10. Name and Address of New Registered Agent 81 Name <b>STEVEN H. HOFFMAN</b> 82 Street Address (P.O. Box Number is Not Acceptable) <b>2395 Tallahassee</b> 83 84 City <b>Weston</b> FL 85 Zip Code <b>33326</b>	
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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 *[Signature]* **STEVEN H. HOFFMAN** Date **4/24/97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>D</b> <input type="checkbox"/> DELETE	1.1 TITLE	<b>D</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BATTAGLIOLA, ALFRED</b>	1.2 NAME	
STREET ADDRESS	<b>% 1321 SOUTH 30TH AVE.</b>	1.3 STREET ADDRESS	<b>9177 D SW 22nd St.</b>
CITY-ST-ZIP	<b>HOLLYWOOD FL 33020</b>	1.4 CITY-ST-ZIP	<b>Boca Raton, FL 33428</b>
TITLE	<b>D</b> <input type="checkbox"/> DELETE	2.1 TITLE	<b>D, P, S, T</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>HOFFMAN, STEVEN H</b>	2.2 NAME	<b>2395 Tallahassee</b>
STREET ADDRESS	<b>% 1321 SOUTH 30TH AVE.</b>	2.3 STREET ADDRESS	<b>Weston, FL 33326</b>
CITY-ST-ZIP	<b>HOLLYWOOD FL 33020</b>	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<b>D, V</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	<b>Kevin Cochran</b>
STREET ADDRESS		3.3 STREET ADDRESS	<b>5062 NW 6th St.</b>
CITY-ST-ZIP		3.4 CITY-ST-ZIP	<b>Delray Beach, FL 33445</b>
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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

SIGNATURE: *[Signature]* **STEVEN H. HOFFMAN** Date **4/24/97**

CR2E034 (9/96)