Mar 05, 1999 8:00 am Secretary of State

03-05-1999 90058 029 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P96000012113**1. Corporation Name

EXECUNET COMMUNICATIONS CORP.

		<u></u>				
Principal Place of Business Mailing Address						(IEBuset ife this and that said see and the said see
2455 HOLLYWOOD BLVD 2455 HOLLYWOOD BLVD						
HOLLYWOOD FL 33020		HOLLYWOOD FL 33020				DO MOT WOLFE IN THIS CRACE
US		US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed	
						02/07/1996
2 Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number Applied For
21		26				65-0554356 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				\$8.75 Additional
22		27				5. Certificate of Status Desired Fee Required
City & State		City & State				6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip			Cou	ntry		8. This corporation owes the current year Intangible
24	25		30			Personal Property Tax. Yes No
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent
TEDA	ANELLO LOUIS I			81	Name	·
TERMINELLO, LOUIS J				82	Street Addr	ress (P.O. Box Number is Not Acceptable)
2700 S.W. 37TH AVE. MIAMI FL 33133					ļ 	
MIAN	/II PL 33 133		İ	83		,
				84	City	85 Zip Code
					<u> </u>	FL 183 249 0000
office or r	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig	of Florida, Such channe was at	uthorized	bv i	the corporation	poration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered
SIGNATURE						
	Signature, typed or printed name of registered ag-			Agent	t signature require	ed when reinstating) DATE
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PTD PEANABOO JOHN	☐ DELETÉ	1.1 111			. C.
NAME	DE MARCO, JOHN		1.2 NAME			
STREET ADDRESS	2455 HOLLYWOOD BLVD				ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL	□ DELETE		CITY-ST-ZIP		☐ Change ☐ Addition
TITLE	SVD MANUEL DOAD	☐ DELETE	2.1 TIT			Contained Production
NAME	MANUEL, BRAD		2.2 NA			
STREET ADDRESS	2455 HOLLYWOOD BLVD		- 6		ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL	☐ DELETE	2. 4 CF		T-ZIP	Change Addition
TITLE		☐ percic	3.1 TIT			The same of the sa
NAME			3.2 NA			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP		☐ DELETÉ	3.4, CI 4.1 TIT		T-ZIP	Change Addition
TITLE		_ DELETC				C orange C results
NAME			4. 2 N/			
STREET ADDRESS					TADORESS	
CITY-ST-ZIP		☐ DELETE	4.4 CIT		1-417	☐ Change ☐ Addition
TITLE			5.1 III			,
NAME			E		ADDRESS	
STREET ADDRESS			5.4 CIT			
CITY-ST-ZIP TITLE		□ DELETE	6.1 TIT			☐ Change ☐ Addition
			6.2 NA			
NAME STOCET ADDDESS			1		TADDRESS	

6.4 CITY-ST-ZIP CITY-ST-ZIP 14. I hereby certify that the information supplied with this filling 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 chapted, or office an address, with all other like empowered.

SIGNATURE:)