


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

FILED
May 01 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000012588

1. Corporation Name
TrueNet Corporation

Principal Place of Business 4521 P.G.A. Blvd. Suite 264 Palm Beach Gardens, FL 33418	Mailing Address 4521 P.G.A. Blvd. Suite 264 Palm Beach Gardens, FL 33418
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2. Principal Place of Business 21 324 Datura Street Suite, Apt. #, etc. 22 Suite 150 City & State 23 West Palm Beach, FL Zip 24 33401	2a. Mailing Address 26 324 Datura Street Suite, Apt. #, etc. 27 Suite 150 City & State 28 West Palm Beach, FL Zip 29 33401	Country 25 U.S.A.	Country 30 U.S.A.
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3. Date Incorporated or Qualified 02/05/96	3a. Date of Last Report 02/05/96
4. FEI Number 65-0657628	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
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

Robert C. Hackney
4521 P.G.A. Blvd., Suite 264
Palm Beach Gardens, FL 33418

10. Name and Address of New Registered Agent

81 Name	Tarek Kirschen
82 Street Address (P.O. Box Number is Not Acceptable)	324 Datura Street, Suite 150
83	
84 City	West Palm Beach
85 Zip Code	FL 33401

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 in accordance with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *[Signature]* **President** DATE: **2/26/97**

12. OFFICERS AND DIRECTORS

1.1 TITLE D	<input checked="" type="checkbox"/> DELETE
1.2 NAME Robert C. Hackney	
1.3 STREET ADDRESS 4521 P.G.A. Blvd., Ste. 264	
1.4 CITY-ST-ZIP Palm Beach Gardens, FL 33418	
2.1 TITLE DELETED	<input type="checkbox"/> DELETE
2.2 NAME DELETED	
2.3 STREET ADDRESS DELETED	
2.4 CITY-ST-ZIP DELETED	
3.1 TITLE DELETED	<input type="checkbox"/> DELETE
3.2 NAME DELETED	
3.3 STREET ADDRESS DELETED	
3.4 CITY-ST-ZIP DELETED	
4.1 TITLE DELETED	<input type="checkbox"/> DELETE
4.2 NAME DELETED	
4.3 STREET ADDRESS DELETED	
4.4 CITY-ST-ZIP DELETED	
5.1 TITLE DELETED	<input type="checkbox"/> DELETE
5.2 NAME DELETED	
5.3 STREET ADDRESS DELETED	
5.4 CITY-ST-ZIP DELETED	
6.1 TITLE DELETED	<input type="checkbox"/> DELETE
6.2 NAME DELETED	
6.3 STREET ADDRESS DELETED	
6.4 CITY-ST-ZIP DELETED	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME Tarek Kirschen	
1.3 STREET ADDRESS 324 Datura Street, Suite 150	
1.4 CITY-ST-ZIP West Palm Beach, FL 33401	
2.1 TITLE DELETED	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME DELETED	
2.3 STREET ADDRESS DELETED	
2.4 CITY-ST-ZIP DELETED	
3.1 TITLE DELETED	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME DELETED	
3.3 STREET ADDRESS DELETED	
3.4 CITY-ST-ZIP DELETED	
4.1 TITLE DELETED	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME DELETED	
4.3 STREET ADDRESS DELETED	
4.4 CITY-ST-ZIP DELETED	
5.1 TITLE DELETED	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME DELETED	
5.3 STREET ADDRESS DELETED	
5.4 CITY-ST-ZIP DELETED	
6.1 TITLE DELETED	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME DELETED	
6.3 STREET ADDRESS DELETED	
6.4 CITY-ST-ZIP DELETED	

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 included 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, unchanged, or on an attachment with an address.

SIGNATURE: *[Signature]* DATE: **2/27/97**

CR2E034 (9/96)