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

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000027446 (9)

NET SHOP MALL, INC.

Principal Place of Business	Mailing Address
2500 NORTH FEDERAL HIGHWAY	2500 NORTH FEDERAL HIGHWAY
SUITE 1801 → <> )	SUITE 304 201
FT. LAUDERDALE FL 33305	FT. LAUDERDALE FL 33305-1618

**FILED** May 09 1997 8:00am Secretary of State



2500 NORTH I SUITE 1074 - FT. LAUDERDA		2500 North Federal I Suite 304 ここり Ft. Lauderdale Fl 33						
					3. Date Incorporated or Qualified 03/28/1996	3a. Date of Last	Report	
	Place of Business	2a. Mailing Address			4. FEI Number	~   A	Applied For	
21		26			65-074195		lot Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.	<del></del>		5. Certificate of Status Desired S8.75 Additional			
22 City & Stat	ΙΔ	City & State					Required	
23	28				S. Election Campaign Financing Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Zip Country		8. This corporation has liability for i	or intangible tax under s. 199.032,		
24	25		30			Yes No		
	9. Name and Address of Co	rrent Registered Agent			10. Name and Address of New Reg	jistered Agent		
	HRADER, ROBERT G		8	¹ Name \	lolkman Dinkson			
	EAST BROWARD BLVD.		8:	2 Street Ad	Idress (P.O. Box Number is Not Acceptab	lo)		
FI.	LAUDERDALE FL 33301			7.50	WH garabof H OC		1901	
			8:	3		7		
,			8-	City 7	a bedrack tea		Code	
11. Pursuant	to the provisions of Sections 607	.0502 and 607.1508, Florida Statu	ites, the abo	ve-named co	orporation submits this statement for the pration's board of directors. I hereby accept	urpose of changing	its registered	
office or of a great N	registered agent, or both, in the s novemblial with and accordance	State of Alorida. Such change was Obligations of Section 607.0505. F	authorized b Iorida Stabiti	by the corpor	ration's board of directors. I hereby accep	t the appointment as	s registered	
SIGNATURE		LOM ~ J-Pa			Sulred whon reinstaling)	1/9/)		
12.		AND DIRECTORS	13.	gorii aignatore rec	ADDITIONS/CHANGES TO OFFICE		RS IN 12	
TITLE	President	☐ DELETE	1.1 TITLE			Change	Addition 8	
NAME	Volkmar DI.	deservi	1.2 NAME	.				
STREET ADDRESS	2500 H. Fedor	0 Smit 201	1.3 STREE	T ADDRESS			8	
CITY-ST-ZIP	Fort Lander of a	1. 3330.5	1.4 CITY-	1				
TITLE		DELETE	21 TITLE			Change	[] Addition	
NAME			2.2.NAME	:		_ •		
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CITY-ST-ZIP			2 4 CITY	- ST - ZiP				
TITLE		DELETE	3.1 TITLE			☐ Change	Addition	
NAME			3.2 NAME			-	1	
STREET ADDRESS			3.3 STREE	T ADDRESS				
CITY-ST-ZIP	_		3.4, CITY	- ST- ZIP			ł	
TITLE		DELETE	4.1 1111.6			Change	Addition	
NAME			4. Ź NAMI	:				
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CITY-ST-ZIP			4.4,CI1Y-	\$1-2IP				
TITLE		DELETE	5.1 TITLE			☐ Change	Addition	
NAME			5.2∜NAME					
STREET ADDRESS			5.3 STREE	1 ADDRESS				
CITY-ST-ZIP			5.4 CRY-	ST-7IP				
TETLE		DELETE	6.1 THLE			Change	Addition	
NAME			6.2 INAME					
STREET ADDRESS			6.3 STREE	1 ADDRESS				
CITY-ST-ZIP			6.4 <u>/</u> C/TY-	ST-ZIP				
14. I do beret	by certify that the information sur-	polied with this filing does not oug	lify for the ex	omption etate	ed in Section 119 07(3)(i) Florida Statutes	I further certify the	titho	

Too nereby certify that the information supplied with this filling does not qualify for the exemption stated in section (19.07(1), Florida Statutes). Further certify that the filling make under oath; that information indicated on this alphual ropot, or supplied model annual report accurate and that my signature shall have the same legal effect as if made under oath; that it am an officer or director of the corporation or the resource of vustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name