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

FILED Feb 26 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P96000027446 (9) NET SHOP MALL, INC. Principal Place of Business Mailing Address 2500 NORTH FEDERAL HIGHWAY 2500 NORTH FEDERAL HIGHWAY SUITE 304 SUITE 304 DO NOT WRITE IN THIS SPACE FT. LAUDERDALE FL 33305 FT. LAUDERDALE FL 33305 3. Date Incorporated or Qualified 03/28/1996 Applied For 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 21 26 65-074 1955 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 8. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year intangible 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 DIRKSON, VOLKMAR sen かるい 2500 N FEDERAL HWY SUITE 201 82 O. Box Number is FORT LAUDERDALE FL 33305 83 Zip Code 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 obligation of, Section 607.0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. Addition DELETE 1.1 TITLE Change Dir Ksen, Volkm 2 DIRKSON, VOLKMAR NAME 1.2 NAME 2500 N FEDERAL SUITE 201 1.3 STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DAVIES, PHILLIP Addition DELETE Change 2.1 TITLE TITLE 5. Occan is NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS BOCA RATOW, FLA CITY-ST-ZIP 2. 4 CITY - ST- ZIP DELETE Change Addition TITLE 3.1 TITLE NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY-ST-ZIP DELETE Change ☐ Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME STREET ADORESS 5.3 STREET ADDRESS

14. I 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.

5.4 CHY-ST-ZIP

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS ☐ Change

Addition

DELETE

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

Dirlia 2/18/98 ACU/176-26AD