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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

DOCUMENT # P96000044421 (1)

1. Corporation Name  
NET ACCESS, INC.



Principal Place of Business  
10343 ROYAL PALM BLVD. STE 266  
CORAL SPRINGS FL 33065

Mailing Address  
10343 ROYAL PALM BLVD. STE 266  
CORAL SPRINGS FL 33065-4817

3. Date Incorporated or Qualified  
05/23/1986

3a. Date of Last Report

2. Principal Place of Business  
21 529 West 42nd Street  
Suite, Apt. #, etc.  
22 Suite 7N  
City & State  
23 New York, NY  
Zip  
24 10036 Country

2a. Mailing Address  
26 529 West 42nd Street  
Suite, Apt. #, etc.  
27 Suite 7N  
City & State  
28 New York, NY  
Zip  
29 10036 Country

4. FEI Number  
Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent  
HART, GLEN  
10343 ROYAL PALM BLVD. STE 266  
CORAL SPRINGS FL 33065

10. Name and Address of New Registered Agent  
81 Name Stanley Margulies  
82 Street Address (P.O. Box Number is Not Acceptable) 3301 N. Country Club Drive  
83 Suite 808  
84 City Aventura FL 85 Zip Code 33180

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 607.1509, Florida Statutes.

SIGNATURE: Stanley Margulies (NOTE: Registered Agent signature required when reinstating) DATE: 4/24/97

| 12. OFFICERS AND DIRECTORS |                                | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |  |
|----------------------------|--------------------------------|---|--|
| TITLE                      | PD                             | 1.1 TITLE   |  |
| NAME                       | MARGULIES, WAYNE               | 1.2 NAME  |  |
| STREET ADDRESS             | 529 WEST 42ND ST STE 7N        | 1.3 STREET ADDRESS                                    |  |
| CITY-ST-ZIP                | NEW YORK NY 10038              | 1.4 CITY-ST-ZIP                                       |  |
| TITLE                      | VD                             | 2.1 TITLE   |  |
| NAME                       | HART, GLEN                     | 2.2 NAME  |  |
| STREET ADDRESS             | 10343 ROYAL PALM BLVD. STE 266 | 2.3 STREET ADDRESS                                    |  |
| CITY-ST-ZIP                | CORAL SPRINGS FL 33065         | 2.4 CITY-ST-ZIP                                       |  |
| TITLE                      |                                | 3.1 TITLE   |  |
| NAME                       |                                | 3.2 NAME  |  |
| STREET ADDRESS             |                                | 3.3 STREET ADDRESS                                    |  |
| CITY-ST-ZIP                |                                | 3.4 CITY-ST-ZIP                                       |  |
| TITLE                      |                                | 4.1 TITLE   |  |
| NAME                       |                                | 4.2 NAME  |  |
| STREET ADDRESS             |                                | 4.3 STREET ADDRESS                                    |  |
| CITY-ST-ZIP                |                                | 4.4 CITY-ST-ZIP                                       |  |
| TITLE                      |                                | 5.1 TITLE   |  |
| NAME                       |                                | 5.2 NAME  |  |
| STREET ADDRESS             |                                | 5.3 STREET ADDRESS                                    |  |
| CITY-ST-ZIP                |                                | 5.4 CITY-ST-ZIP                                       |  |
| TITLE                      |                                | 6.1 TITLE   |  |
| 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: Wayne Margulies DATE: 4/24/97 DAYTIME PHONE: 312-629-9844

CR2E034 (9/96)