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Mar 06 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 # P96000048905 (9)

1. Corporation Name  
CANET INC.



Principal Place of Business  
9235 LAGOON PLACE APT 105  
FT LAUDERDALE FL 33324

Mailing Address  
9235 LAGOON PLACE APT 105  
FT LAUDERDALE FL 33324-6719

3. Date Incorporated or Qualified  
06/06/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 20355 NE 34 COURT

26 PO BOX 292454

Suite Apt. #, etc.

Suite, Apt. #, etc.

22 1622

27

City & State

City & State

23 NORTH MIAMI BEACH

28 FORT LAUDERDALE, FL

Zip

Country

Zip

Country

24 33180

25 USA

29 33329

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ETBERG, COLIN  
9235 LAGOON PLACE APT 105  
FT LAUDERDALE FL 33324

81 Name FEIN, GARY

82 Street Address (P.O. Box Number is Not Acceptable)

20355 NE 34 COURT

83 # 1622

84 City NORTH MIAMI BEACH 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 607.0509, Florida Statutes.

SIGNATURE

GARY FEIN

3-1-97

(Signature of person or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  
NAME D ETBERG, COLIN  
STREET ADDRESS 9235 LAGOON PLACE APT 105  
CITY- ST- ZIP FT LAUDERDALE FL 33324

☒ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

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CITY- ST- ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

☐ DELETE

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY- ST- ZIP

D ETBERG, COLIN  
20355 NE 34 COURT  
NORTH MIAMI BEACH, FL 33180

☒ Change ☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY- ST- ZIP

P GARY FEIN  
20355 NE 34 COURT  
NORTH MIAMI BEACH, FL 33180

☐ Change ☒ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY- ST- ZIP

☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY- ST- ZIP

☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY- ST- ZIP

☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY- ST- ZIP

☐ Change ☐ Addition

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:

GARY FEIN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-1-97

Date

(305) 944-5335

Daytime Phone #

CR2E034 (9/96)