## 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 # P9600054118 (0)

GENESNET CORP.

Principal Place of Business Mailing Address

10508 WEST FLAGLER STREET SUITE 112 10508 WEST FLAGLER STREET SUITE 112

MIAMI FL 33154 MIAMI FL 33174-1631

## FILED Apr 23 1997 8:00am Secretary of State

Date Incorporated or Qualified	3a. Date of Last Report
06/25/1996	ba. Example Cast Hopert

3.

					06/25/1996	
2, Principal Pl	Principal Place of Business 2a. Mailing Address				/ <b>-</b>	ed For
21		26			65-0677 2 83 Not Applied To	
	Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Add	
27				Fee Requ		
City & State City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip	Country	<b>28</b>	1 Countr	<del></del>		
24	25	29	30	,	8. This corporation has fiability for intangible tax under s. 19 Florida Statutes Yes No	98.032,
	9. Name and Address of Current		1001		10. Name and Address of New Registered Agent	
AME	RILAWYER CHARTERED		81	Name		
343 ALMERIA AVENUE CORAL GABLES FL 33134			82	62 Street Address (P.O. Box Number is Not Acceptable)		
			02	Street Address (F.O. Box Number is Not Acceptable)		
			83	1		
£1,			84	City	85 Zip Coa	do
			04	City	FL   S   Zip Co.	a <del>c</del>
11. Pursuant	to the provisions of Sections 607,0502	2 and 607.1508, Florida Statu	tes, the abov	e named corp	poration submits this statement for the purpose of changing its re	egistered
office or r	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was itions of, Section 607.0505, Fl	authorized b Iorida Statulo	iy the corporat es.	ation's board of directors. I hereby accept the appointment as req	gisiered
SIGNATURE						
	Signature, typed or pointed name of registered age i			jent signature <b>roq</b> uit	pired when reinstating) DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS I	N 12 Addition
TITLE	MONTERO, LAURA E	☐ DELETE	1.1 TITLE		L_j Change [	Audilion
NAME	10508 WEST FLAGLER STREE	T SUITE 112	1.2 NAME			
STREET ADDRESS	MIAMI FL 33154	1 OOIL 112		1 ADDRESS		
CITY-ST-ZIP TITUE	MINAMI I C DOTOT	DELETE	1.4 CITY- 2.1 TITLE	SI-ZIP	Change	Addition
NAME		precit	2.2 NAME		C. Cridings (	
STREET ADDRESS				1 ADDRESS		
			2.4 CITY			
CITY-ST-ZIP TITLE		DELETE	3.1 TillE	-3(-70	Change	Addition
NAME		_	3.2 NAME		-	
STREET ADDRESS				1 ADDRESS		
CITY-ST-ZIP			3.4. CITY			
TITLE		DELETE	4.1 1011		Change [	Addition
NAME			4. 2 NAM	f		
STREET ADDRESS			4.3 STREE	T ADDRESS		
CITY-ST-ZIP			4.4 CITY-	ST-ZiP		
TITLE		☐ DELETE	5 1 TITLE		Change	Addition
NAME :			5.2 NAME			
STREET ADDRESS			5.3 STREE	1 ADDRESS		
CITY-ST-ZIP			54 CHY-	SI-7IP		7.00
TITLE		☐ DELETE	6.1 TITLE		Change [	Addition
NAME			6.2 NAME			
STREET ADDRESS				T ADDRESS		
CITY-ST-7IP			6.4 CITY -	ST-ZIP		

14. 1 do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statules. 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 Statules; and that my name appears in Block 12 or Block 13 of branged, or on an attachment with an address.

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LAURA E. MONTERO

4.15-97

(305) 266-2464