SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000083201 (9)

DIGITAL EXPRESS INTERNET SERVICES, INC.

Mailing Address

FILED Jul 16 1998 8:00am Secretary of State



4417 CONSTITUTI MARIANNA FL 32					
MARIANNA FL 32		4417 CONSTITUTION LANE MARIANNA FL 32448			
	2948			DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				10/09/1996	
2. Principal Pla	ice of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26			Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		59-3413497	
22		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	
23		[28]		Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the curren	
24	25	29	30		Yes No
	9. Name and Address of Curren		1001	10. Name and Address of New Registered Ag	
PONIN			81 Name		,
BONDURANT, FRANK E				138011 4 K CO K C K L K K K K K K K K K K K K K K K K	N
4450 LAFAYETTE STREET			82 Street	Aggress (P.O. Box Number is Not Acceptable)	
Marianna Fl 32446			83	of thomasville ko	
			83		
			84 City	• \\	85 Zip Code
				allablassee FL	32301
11. Pursuant to	o the provisions of sections 607.0502	and 607.1508, Florida Statute	es, the above-named	corporation submits this statement for the purpose of char poration's board of directors. I hereby accept the appointr	iging its registered
agent. I an	maminar with, and apcept the obliga	of Florida. Such change was all on so of section 607.0505, Fi	orida Statutes.	oration's board of directors, thereby accept the appoint	nent as registered
SIGNATURE _	of any Killer	Krade 6	YAULO BROX	oks Kundin 7/8/98	
SIGNATIONE	Ignature, typed or printed flame of registered agen	Brid tille if applicable (N	OTE: Registered Agent signate	re required when reinstating) DATE	
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	DΫ	DELETE	1.1 TITLE	D	Change Addition
NAME (arnold, robert w	•	1.2 NAME	KATHY MEADE	
1	2648 PEBBLE HILL ROAD		1.3 STREET ADDRESS	3435 HICKORY HILL RD	í
1.3				2422 HICKORY 11100 112	
CITY-ST-ZIP	Marianna Fl				
	<u>Marianna Fl</u> DP	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	MACIANNA, FL	Channe Arkdition
TITLE	DP	DELETE	1.4 City-St-ZiP 2.1 TiTLE	MARIANNA, FL DVST	Change Addition
TITLE NAME	DP STOTTLEMIRE, JOHN A	DELETE	1.4 City-St-ZIP 2.1 Title 2.2 NAME	MARIANNA, FL DVST KEVIN ROCKHILI	Change 🔀 Addition
TITLE NAME STREET ADDRESS	DP STOTTLEMIRE, JOHN A 4375 ANGELA DRIVE	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	MARIANNA, FL DVST KEVIN ROCKHILI 4375 ANGELA DR	Change 🔀 Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DP STOTTLEMIRE, JOHN A 4375 ANGELA DRIVE	DELETE	1.4 City-St-ZiP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 City-St-ZiP 3.1 TITLE	MARIANNA, FL DVST KEVIN ROCKHIT! 4375 ANGELA DR MARIANNA, FL	Change Addition Change Addition
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4.1 hereby certify that the information supplied with this filing does not quality for the exemption stated in section 119.07(3)(ii). 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:

2. 1.011

7/2/98

850-576-5004

42E034 (5/98)