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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000091582

1. Corporation Name

TELEBIT NETWORKS, INC.

Principal Place of Business

Mailing Address

Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90034 042 ***150.00



DEERFIELD BE		DEERFIELD BEACH FL 33442							
DESIGNATIVE OF THE STATE OF THE			• ••			DO NOT WRITE IN THIS SPACE			
:					,	3. Date Incorporated or Qualifed 11/05/1996			
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	Applied For		
21	•	26	6)			65-0708252	No	t Applicable	
Suite, Apt.	Suite, Apt. #, etc.				7	\$8.75	Additional		
27						5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be			
City & State City & State						6. Election Campaign Financing	•	•	
23	Zip Country Zip			Country		Trust Fund Contribution	Added t	o rees	
Zip	,		30	uy		8. This corporation owes the current year Intangible Personal Property Tax.			
24	25 29 30 9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent				AU	
	5. Haine and Address of Current	Registered Agent		31 Na	ame	To trains and reasons of their registres as			
HERBERT, THOMAS 772 NW 41 TERRACE DEERFIELD BEACH FL 33442									
				82 Street Addr		dress (P.O. Box Number is Not Acceptable)			
				33				14 3 1	
i			5	34 Cit	tv.		85 Zip (Code '**	
IDEMONIFORM CONTROL						FL		l l	
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 0505, Florida Statutes.									
SIGNATURE MARINE AWY / Thomas Herbert 3-18-99									
SIGNATURE	Signature, typed or printed manne of registered agent	and title if applicable. (NOTE	: Registered A	gent signa	ature required v	when reinstating) DATE			
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND			
TITLE	P	☐ DELETE	1.1 TITL	E	ĺ	· L] Change	Addition]	
NAME	HERBERT, THOMAS		1.2 NAM	Ε	}			1	
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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 informationated 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 cath; 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, with all other like empowered.

SIGNATURE:

JUM FETTUT HOMAS QUHEVE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR