

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

FILED
Aug 04 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000092000 (4)

1. Corporation Name
DIRECTNET, INC.



Principal Place of Business 62 SOUTHEAST SIXTH AVENUE DELRAY BEACH FL 33483	Mailing Address 62 SOUTHEAST SIXTH AVENUE DELRAY BEACH FL 33483-5314
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3. Date Incorporated or Qualified 11/04/1996	3a. Date of Last Report INITIAL REPORT
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2. Principal Place of Business 21 224 COMMERCIAL BLVD. Suite, Apt. #, etc. 22 SUITE 206 City & State 23 LAUDERDALE BY THE SEA, FL Zip 24 33308	2a. Mailing Address 26 224 COMMERCIAL BLVD. Suite, Apt. #, etc. 27 SUITE 206 City & State 28 LAUDERDALE BY THE SEA, FL Zip 29 33308	4. FEI Number 65-0715337	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No
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9. Name and Address of Current Registered Agent

LONG, DAVID S
62 SOUTHEAST SIXTH AVENUE
DELRAY BEACH FL 33483

10. Name and Address of New Registered Agent

81 Name LONG, DAVID S	82 Street Address (P.O. Box Number is Not Acceptable) 224 COMMERCIAL BLVD	83	84 City LAUDERDALE BY THE SEA FL	85 Zip Code 33308
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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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	LONG, DAVID S	
STREET ADDRESS	62 SOUTHEAST SIXTH AVENUE	
CITY-ST-ZIP	DELRAY BEACH FL 33483	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	VP, D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	LONG, DAVID S	
1.3 STREET ADDRESS	224 COMMERCIAL BLVD.	
1.4 CITY-ST-ZIP	LAUDERDALE BY THE SEA, FL 33308	
2.1 TITLE	P, D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	NICOLETTI, PETE	
2.3 STREET ADDRESS	224 COMMERCIAL BLVD	
2.4 CITY-ST-ZIP	LAUDERDALE BY THE SEA, FL 33308	
3.1 TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
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

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6-30-97 954 722-3339

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