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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000004696 (5)

NET WAY COMMUNICATIONS, CORP.

Principal Place of Business

1035 S. FEDERAL HWY., UNIT 210

Mailing Address

1035 S. FEDERAL HWY., UNIT 210

FILED Feb 27 1998 8:00am Secretary of State



02/18/98

DELRAY BEACH FL 33483		0E	DELRAY BEACH FL 33483					DO NOT WRITE IN THIS SPACE					
							3	. Date In	corporated	or Qualifie	ď		
								01/16	6/1997				
2. Principal Pla		2a.	Mailing Address	2 2				FEI Nu	mber		· · · · · · · · · · · · · · · · · · ·	A	pplied For
21 282 NE 163 ST (4P) 26			2821 NE 163 ST				(05-	0728	<u>698 </u>			lot Applicable
Suite, Apt. # 22 49		} - · · ·	Suite, Apt. #, etc.				5.	5. Certificate of Status Desired \$8.75 Additional Fee Required					
City & Stato			City & State				6.		n Campaigr	-			May Be
23 MIAW		28	MIAM PO	·					und Contrib		<u> </u>		I to Fees
Zip 24 33160	Country 25 DADE	lan -	¹¹³ 33160		DADE		8.		irporation o al Property			urrent year In Yes	ntangible □ No
24 33/60	9. Name and Address	of Current Regist		30	-4-1	00					Registered	•	
		or current riogist	orogony		81	Name							
	A, MANUEL					_							
2250 SW 3RD AVE. 3RD FL.					82	82 Street Address (P.O. Box Number is Not Acceptable)							
MIAI	VII FL 33129				83								
													
					84	City					FI	85 Zip	Code
11. Pursuant to	the provisions of Section gistored agent, or both, in	s 607.0502 and 60 the State of Florid	7.1508, Florida Stat	tutes, the s	above ed by	e-named the cor	d corporation's	on submi board of	its this state directors. I	ment for the	e purpose cept the ap	of changing pointment a	its registered s registered
agent. I an	familiar with, and accept	the obligations of,	Section 607.0505,	Florida St	alute	S.	•				,		
SIGNATURE.							 				DATE		
	Signature, typed or preped respected to	rejishmid ageut ar dibblic. ICERS AND DIRLC		IOIE Register	<u>.</u>	ent signature	ire required whe			SES TO OF		ID DIRECTO	RS IN 12
12.	D	GERS AND URILG	DELETE		TITLE		T	ADDITIO	JNO/CHAIN	363 10 01	FIOLIS AN	Change	
TITLE	OTTENS, WILLIAM E		C becare		NAME								
	•	AN THAIL WA				ADDRESS	,						
STREET ADDRESS	1035 S. FEDERAL H				CITY - S		'						
CHY-ST-ZIP TITLE	DELRAY BEACH FL : D	33463	DELETE		TITLE	51-217						Change	Addition
NAME	FLEISCHER, JORGE				NAME					_		_ •	
STREET ADDRESS	1035 S. FEDERAL H	WY LINIT 210				ADDRESS	282	NE	163 ST	r (#	4P)		
CITY-ST-ZIP	DELRAY BEACH FL	•				ST-ZIP	MIA	111	163 ST FL 33	160	,		
TIFLE	DECIMI DENOTITE	30700	DELETE		TITLE	51-211		MA			*****	Change	Addition
NAME					NAME								
STREET ADDRESS				3.3	STREET	ADDRESS	s l						
CITY-ST-ZIP				3.4	CITY-	ST - Z IP							
TITLE			DELETE		TITLE		1					Change	Addition
NAME				4. 2	NAME								
STREET ADDRESS				4.3	STREET	ADDRESS	3]						
CITY - ST - ZIP				4.4	CITY- S	ST-ZIP							
TITLE			DELETE	5.1	TITLE	_						Change	Addition
NAME				5.2	NAME		1						
STREET ADDRESS				53	STREET	ADDRESS	3						
CITY-ST-ZIP				54	CITY-S	SY-ZIP							
THLE			☐ DELETE	61	TITLE							Change	☐ Addition
NAME				62	NAME								
STREET ADDRESS				63	STREET	ADDRESS	3						
DITY-ST-ZIP				6.4	CITY-S	ST - ZIP							
14. I hereby or indicated of officer or of Block 12 of the second of the	ortify that the information so on this annual report or su director of the corporation or Block 13 if changed, or	supplied with this fi piplemental annual or the receiver or t on an atlachment	ling does not qualify report is true and rusted employment with an allows	ourate a corate a coexecute	xemp ind the this	otion stat lat my sig report a	ated in Sect signature sh as required	tion 119.0 nall have I by Char	07(3)(i), Flor the same le oter 607, Flo	ida Statute gal effect orida Statut	s. I further o as if made u es; and tha	certify that th under oath; ti t my name a	e Information hat I am an ppears In