


5-7-98 B6721 C
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	--

DOCUMENT # P97000023539 (4)
1. Corporation Name
HYPERLIGHT NETWORK, INC.

Principal Place of Business 850 5TH AVE SOUTH NAPLES FL 34102	Mailing Address 850 5TH AVE SOUTH NAPLES FL 34102
---	---

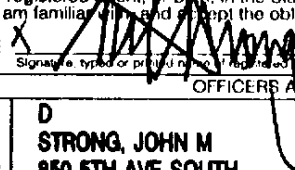


DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 188 N. LAKE DR Suite, Apt. #, etc. 22 City & State 23 NAPLES FL Zip 24 34102		2a. Mailing Address 26 188 N. LAKE DR Suite, Apt. #, etc. 27 City & State 28 NAPLES FL Zip 29 34102		3. Date Incorporated or Qualified 03/10/1997 4. FEI Number 59-3433461 Applied For Not Applicable 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 7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
---	--	--	--	--	--

9. Name and Address of Current Registered Agent FIELDS, ALAN B 850 5TH AVE SOUTH NAPLES FL 34102		10. Name and Address of New Registered Agent 81 Name STRONG, JOHN M 82 Street Address (P.O. Box Number is Not Acceptable) 188 N. LAKE DR 83 84 City NAPLES FL 85 Zip Code 34102	
---	--	--	--

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  (NOTE: Registered Agent signature required when reinstating) DATE 4/28/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	
NAME	STRONG, JOHN M	1.2 NAME	STRONG, JOHN M
STREET ADDRESS	850 5TH AVE SOUTH	1.3 STREET ADDRESS	188 N. LAKE DR
CITY-ST-ZIP	NAPLES FL 34102	1.4 CITY-ST-ZIP	NAPLES FL 34102
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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 the title block with an address.

SIGNATURE: 

4/28/98

CR2034 (10/97)