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FILED
Feb 24 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 # P97000025182 (1)

1. Corporation Name

VCN VIRTUAL COMMUNITY NETWORK, INC.



Principal Place of Business

1770 BAY ROAD
MIAMI BEACH FL 33139

Mailing Address

1770 BAY ROAD
MIAMI BEACH FL 33139

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/19/1997

4. FEI Number

65-0738210

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

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9. Name and Address of Current Registered Agent

CORPORATE CREATIONS ENTERPRISES, INC.
4521 PGA BOULEVARD
#211
PALM BEACH GARDENS FL 33418

10. Name and Address of New Registered Agent

81 Name

MARSHALL KANNER, D. SE. CHAIRMAN

82 Street Address (P.O. Box Number is Not Acceptable)

1770 BAY ROAD

83

84

City MIAMI BEACH

FL

85

Zip Code 33139

11. Pursuant to the provisions of Sections 607.0502 and 607.1005, 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

MARSHALL KANNER

Signature, typed or printed name of registered agent and file a copy of this statement with the corporation's records.

(NOTE: Registered Agent signature required when reinstating)

DATE

2/20/98

12.

OFFICERS AND DIRECTORS

TITLE

D

NAME

KANNER, MARSHALL

STREET ADDRESS

1770 BAY ROAD

CITY-ST-ZIP

MIAMI BEACH FL 33139

TITLE

D

NAME

SHLAGMAN, WOLF

STREET ADDRESS

1770 BAY ROAD

CITY-ST-ZIP

MIAMI BEACH FL 33139

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

SECRETARY

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

PRESIDENT

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

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 incorporator 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 chairman, or on an attachment with an address.

SIGNATURE:

MARSHALL KANNER

2/20/98

(95)5317139

CP2E034 (10/97)