FILED
May 15 1998 8:00am
Secretary of State

FILE NOW: FILING FEE AFTER MAY 1 IS

PROFIT CORPORATION ANNUAL REPORT 1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000068721

1. Corporation Name

UNITED COMM. NET, INC.

Principal Place of Business / Mailing Address

816 S. ATLANTIC AVE. # 107
DAYTONA BC. FLORIDA 32118

3. Date Incorporated or Qualified: AUG. 8, 1997

4. FEI Number: 59-3461971

2. Principal Place of Business	2a. Mailing Address
21 816 S ATLANTIC AVE	26 816 S. ATLANTIC AVE
Suite, Apt. #, etc. 22 # 107	Suite, Apt. #, etc. 27 # 107
City & State 23 DAYTONA BC. FL	City & State 28 DAYTONA BC. FL
Zip 24 32118 Country 25 VOL	Zip 29 32118 Country 30 VOL

5. Certificate of Status Desired — Fee $8.75

6. Election Campaign Financing Trust Fund Contribution — Add to Fees

8. This corporation is liable for ... Florida Statutes

9. Name and Address of Current Registered Agent

AMERILAWYER
343 ALMERIA AVE
CORAL GABLES. FLORIDA
33134

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 ______ DATE ______
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TITLE	PRESIDENT ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	GERALD ABELSON	1.2 NAME	
STREET ADDRESS	816 S. ATLANTIC AVE # 107	1.3 STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BC. FL. 32118	1.4 CITY-ST-ZIP	
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

400002527964
-05/18/98--01135--022
***150.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 ... 4/30/98