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

FILED Mar 25 1998 8:00am Secretary of State

	1000					
1. Corporatio	MENT # P9700 C NETWORK CORP.	0070128 (8)				
Principal Plac	o of Business	Mailing Address				
		· .				
701 BRICKEL Suite 1550	L AVE.	701 BRICKELL AVE. Suite 1550				
MIAMI FL 331	131	MIAMI FL 33131			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
					07/28/1997	
 '	Place of Business	2a. Mailing Address			4. FEI Number Applied For Not Applied	-
Suite, Apt	# ato	Suite, Apt. #, etc.				
22 Suite, Apr.	#, etc.	27 Suite, Apr. #, etc.			5. Certificate of Status Desired	
City & Stat	e	City & State				-
23		28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	-
Zip	Country	Zip	Cou	intry	8. This corporation owes or has paid the current year Intangible	\dashv
24	_ 25	29	30		Personal Properly Tax due June 30. Yes X No	Ī
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registered Agent	\Box
BE	RLIT CORPORATE SERVICES, II	NC.		81 Name	n e	
70	1 BRICKELL AVE.			82 Street	et Address (P.O. Box Number is Not Acceptable)	\dashv
SUITE 1550				<u> </u>		_
MIA	AMI FL 33131			83		
				84 City	85 Zip Code	7
44 6	007.01	00 and 007 4500. Flacida O tat.			FL 85 Zp Cooe	
office or r	egistered agent, or both, in the State	of Florida. Such change was:	authorized	d by the cor	ed corporation submits this statement for the purpose of changing its registered orporation's board of directors. I hereby accept the appointment as registered	3
agent. I a	m familiar with, and accept the oblig	ations of, Section 607.0505, Fl	orida Stat	utes.		- [
SIGNATURE	Signature typed or printed name of registrated ag	enrand title if applicable (NO)	£: Registeres	1 Agent signature	ure required when reinstating) DATE	۔ ـ
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	45
TITLE	D DELETÉ		1.1 TITLE		△D Change ☐ Additio	₩ ₩
NAME	HOLMAN, ERNESTO F		1.2 NAME 8		Ernesto Fernandez-Holmann	2
STREET ADDRESS	701 BRICKELL AVE.		1.3 ST	REET ADDRESS	s Į	Č
CITY-ST-ZIP	MIAMI FL 33131		1,4 CI	TY-ST-ZIP		8
TITLE	D DELETE		2.1 1/1	TLE	☐ Change ☐ Additio	n C
NAME	SHUSTA, ANTONIA		2.2 NA	IME		
STREET ADDRESS	701 BRICKELL AVE.		2.3 ST	REET ADDRESS	s	-
CITY-ST-ZIP	MIAMI FL 33131			ITY-ST-ZIP		_
TITLE	D CARDACOUILLA LIDIEL	☐ DELETE	3.1 TI		Change Additio	л
NAME	CARRASQUILLA, URIEL 701 BRICKELL AVE.		3.2 NA			- [
STREET ADDRESS	MIAMI FL 33131			REET ADDRESS	8	
CITY-ST-ZIP TITLE	D	DELETE	3.4. C	TY-ST-ZIP	☐ Change ☐ Additio	_
NAME	PERKOVICH, LUIS		4.2 N/			"
STREET ADDRESS	701 BRICKELL AVE.		1	REET ADDRESS		1
CITY-ST-ZIP	MIAMI FL 33131			IY-ST-ZIP		
TITLE			5.1 TiT		V ☐ Change ☑ Additio	n
NAME			5.2 NA		MARCELA SEVILLA-SACASA	
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP			5.4 01	Y-SI-ZIP	MIAM! - FI 23131	
TITLE	, , , , , , , , , , , , , , , , , , ,	DELETE	6.1 TIT		V ☐ Change 🔀 Additio	ñ
NAME			6.2 NA	ME	IVAN X. GALLEGOS	
STREET ADDRESS			6.3 ST	REET ADDRESS		
CITY-ST-ZIP			6.4 CII	Y-\$1-ZIP	MINM - F 23131	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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 releiver 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 charged, or on an attribution and the same legal effect as if made under oath; that I am an officer or director of the corporation or the releiver 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 charged, or on an attribution with an address.

TIMAL X. CALLBOOS