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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000074498

1. Corporation Name

American Digital Networks, Inc.

Principal Place of Business

Mailing Address

3599 W. Lake Mary Blvd., Ste. E
Lake Mary, FL 32746

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

8-27-97

4. FEI Number

59-3481027

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐

Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21 3551 W. Lake Mary Blvd.	26 3551 W. Lake Mary Blvd.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 Suite 207	27 Suite 207
City & State	City & State
23 Lake Mary, FL	28 Lake Mary, FL
Zip	Zip
24 32746	29 32746
Country	Country
25 USA	30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name	ELDER N. RIPPER III
82 Street Address (P.O. Box Number is Not Acceptable)	
83	393 GILSON CT.
84 City	HEATHROW
FL	85 Zip Code
	32746

F&L Corp.
The Greenleaf Bldg., 3rd Floor
200 Laura Street
Jacksonville, FL 32201-0240

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

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when "reinstating")

DATE

7-20-99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	Chairman of the Board	1.1 TITLE	
NAME	Leon Brauser	1.2 NAME	
STREET ADDRESS	3551 W. Lake Mary Blvd., Ste. 207	1.3 STREET ADDRESS	900002940479--6
CITY-ST-ZIP	Lake Mary, FL 32746	1.4 CITY-ST-ZIP	-07/23/99--01087--006
TITLE	President/Treasurer	1.5 CITY-ST-ZIP	****150.00 ****150.00
NAME	Elder N. Ripper	2.1 TITLE	
STREET ADDRESS	Same as above	2.2 NAME	
CITY-ST-ZIP		2.3 STREET ADDRESS	
TITLE	Vice-President	2.4 CITY-ST-ZIP	
NAME	Michael Brauser	3.1 TITLE	
STREET ADDRESS	Same as above	3.2 NAME	
CITY-ST-ZIP		3.3 STREET ADDRESS	
TITLE	Secretary	3.4 CITY-ST-ZIP	
NAME	Andrea Welch	4.1 TITLE	
STREET ADDRESS	Same as above	4.2 NAME	
CITY-ST-ZIP		4.3 STREET ADDRESS	
TITLE		4.4 CITY-ST-ZIP	
NAME		5.1 TITLE	
STREET ADDRESS		5.2 NAME	
CITY-ST-ZIP		5.3 STREET ADDRESS	
TITLE		5.4 CITY-ST-ZIP	
NAME		6.1 TITLE	
STREET ADDRESS		6.2 NAME	
CITY-ST-ZIP		6.3 STREET ADDRESS	
TITLE		6.4 CITY-ST-ZIP	
NAME			
STREET ADDRESS			
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; that I am 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/99 407-328-5002

CR2E034 (11/98)