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

DOCUMENT # P97000076813 (9)

PEN NET COMMUNICATIONS, INC.

FILED
May 07 1998 8:00am
Secretary of State

Principal Place of Business Mailing Address		- T LOOTINGS ALD ABILI LADIL ADILL A							
3 WEST GARDEN STREET 3 SUITE 300 S		•	•						
			3 WEST GARDEN STREET SUITE 300 PENSACOLA FL 32501						
						DO NOT WRIT	E IN THIS S	PACE	
	. C 4200	TERONOODS TE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			3. Date incorporated or Qualified 09/09/1997			
2 Principal P	lace of Rueinoss	2a. Ma ling Addre	000			4. FEI Number		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	onlind For
2. Principal Place of Business			<u> </u>			4. FELINGINDO			oplied For
21		·	26					~	ot Applicable
Suite, Apt. #, etc.		<u> </u>	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional
22		27							equired
City & Stat	θ	City & State	City & State			6. Election Campaign Financing	_		May Be
23		28	8			Trust Fund Contribution	<u> LJ</u>	Added	to Fees
Zip	Country	Zip	C∘	untry		8. This corporation owes or has p	aid the curr	ent year In	tangible
24	25	29	30			Personal Property Tax due Jun	e 30.	Yes [⊒ No
	9. Name and Address of Cu	rrent Registered Agent				10. Name and Address of New R	egistered A	gent	
BEA	ASLEY, MICHAEL W			81	Name				Ì
	SEAPINE CIRCLE			-					
	NSACOLA FL 32506			62	Street Addi	ress (P.O. Box Number is Not Accepte	ible)		
r C	10A00LA FE 02000			83					
				83					i
				84	City			85 Zip	Code
				-			FL		
11. Pursuant	to the provisions of Sections 607	.0502 and 607.1508, Florid	a Statutes, the a	above	e-named corp	poration submits this statement for the	purpose of	changing i	ts registered
office or r	egistered agent, or both, in the S m familiar with, and accept the o	itate of Florida. Such chang bligations of Section 607 (je was authorize 1505: Etorida Sta	ed by	the corporal	tion's board of directors. I hereby according	ept the appo	intment as	registered
_	in land with and december	inguloria bi, becilori bor e	oos, i londa ole	itatos					
SIGNATURE	Signature, typed or profled name of registers	at any of and blood soul cuble	INC21 Register	ed Age	or signature requi	ired when reinstating)	DATE		
12.		AND DIRECTORS	13.		an agriciale requi	ADDITIONS/CHANGES TO OFF		DIRECTOR	S IN 12
TITLE	•	DEI				7,007,10110,0111110,0011		Change	Addition
	BELL, M. SR						,		
NAME	3 WEST GARDEN STREET	•		NAME					
STREET ADDRESS			1.3 5	STREET	ADDRESS				Į.
CITY-ST-ZIP	PENSACOLA FL 32501			HTY-S	T - ZIP				
TITLE		☐ DEL	.ETE 2.1 T	ITLE	l			Change	Addition
NAME			2.21	NAME	- 1				
STREET ADDRESS			239	STREET	address				
CITY-ST-ZIP				CITY-S					
TITLE		DEI			51 - 24			Change	Addition
:							'		
NAME				NAME					1
STREET ADDRESS			3.3 5	STREET	ADDRESS				
CITY-ST-ZIP				CITY-S	31-ZIP				
TITLE		☐ DEI	ETE 4.1 T	ITLE				Change	☐ Addition
NAME			4.21	NAME	1				
STREET ADDRESS			4.3 9	STALET	ADDRESS				ľ
CITY-ST-ZIP				CITY-SI]
TITLE		☐ DE			1-2H			Change	Addition
		<u>, ,</u>					,		notinon
NAME				IAME					j
STREET ADDRESS			5.3 9	TREET.	ADDRESS				ļ
CITY-ST-ZIP				CITY-S	1-2IP				
TITLE		☐ DEI	ETE 6.1 T	ITLE				Change	Addition
NAME			6.2 N	IAME	1				
STREET ADDRESS					ADDRESS		-		
									i
CITY-ST-ZIP			6.4 0	HTY-SI	T- Z IP				

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 trusted 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 agriress.

XLM Kill

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