

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 26 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 # P97000088763

1. Corporation Name

POWERNET INTERACTIVE, INC.

Principal Place of Business

Mailing Address

3191 Coral Way
Suite 115-133
Miami, FL 33145

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/15/97

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 7320 BRIAN ROAD

22 City & State

27 Suite, Apt. #, etc.

23 Zip

Country

28 City & State

Country

24

25

29 33314

30

Broward

4. FEI Number

65-0805126

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

9. Name and Address of Current Registered Agent

ELSIE SANCHEZ
343 ALMERIA AVENUE
CORAL GABLES, FL 33134

10. Name and Address of New Registered Agent

81 Name ALEXANDER AKLEPI
82 Street Address (P.O. Box Number is Not Acceptable)
7375 SW 114 AVENUE
83
84 City Miami FL 85 Zip Code 33156

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:

ALEXANDER AKLEPI

4-30-SF

12. OFFICERS AND DIRECTORS

12.1 TITLE PRES/SEC/TREAS. ☐ DIRECTOR

NAME ALEXANDER AKLEPI
STREET ADDRESS 7375 SW 114 AVENUE
CITY, ST, ZIP Miami, FL 33156

12.2 TITLE ☐ DIRECTOR

NAME KEN KRAVITZ
STREET ADDRESS 6801 NW 9th Ave
CITY, ST, ZIP Ft. Lauderdale, FL 33309

12.3 TITLE ☐ DIRECTOR

NAME

STREET ADDRESS

CITY, ST, ZIP

12.4 TITLE ☐ DIRECTOR

NAME

STREET ADDRESS

CITY, ST, ZIP

12.5 TITLE ☐ DIRECTOR

NAME

STREET ADDRESS

CITY, ST, ZIP

12.6 TITLE ☐ DIRECTOR

NAME

STREET ADDRESS

CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

13.1 TITLE

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY, ST, ZIP

13.5 TITLE

13.6 NAME

13.7 STREET ADDRESS

13.8 CITY, ST, ZIP

13.9 TITLE

13.10 NAME

13.11 STREET ADDRESS

13.12 CITY, ST, ZIP

13.13 TITLE

13.14 NAME

13.15 STREET ADDRESS

13.16 CITY, ST, ZIP

13.17 TITLE

13.18 NAME

13.19 STREET ADDRESS

13.20 CITY, ST, ZIP

13.21 TITLE

13.22 NAME

13.23 STREET ADDRESS

13.24 CITY, ST, ZIP

13.25 TITLE

13.26 NAME

13.27 STREET ADDRESS

13.28 CITY, ST, ZIP

14. I hereby certify that the information supplied with this filing does not equal to the information stated in Section 119.07(3)(d), 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 executor 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 of this report or on an attachment with an address.

SIGNATURE:

ALEXANDER AKLEPI

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILE

FILED

CR2E034 (10/97)