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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000015366

FIRENETCOM., INC.

FILED Feb 21, 1999 8:00 am Secretary of State

02-21-1999 90054 038 ***150.00

Principal Place 317 WHITAKER LUTZ FL 3354	=	Mailing Address 317 WHITAKER RD. LUTZ FL 33549		•		3. Date Incorporated or Qualif	VRITE IN THIS			ļ^` -
						02/16/1998				
<u></u>	Place of Business	2a. Mailing Address				4, FEI Number		Ap	plied For	l
21		26				59-349867	٧		t Applicable	l
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	. 🗆	\$8.75		l
City & Sta	nto.	27						Fee Re		į
⊢ ¬ -	ite	City & State				6. Election Campaign Financia	ng 🗆	\$5.00	,	į
Zip	Country	Zip		untry		Trust Fund Contribution		Added 1	o Fees	1
24	25	29	30	uniny		8. This corporation owes the o	zurrent year In			1
24	9. Name and Address of Curre		30			Personal Property Tax. 10. Name and Address of Ne	u Doolotorad	Yes	□No ·	ı
	J. Halle alla Addicas di Colle	ant registered Agent		81	Name	10. Name and Address of Ne	w Registered	Agent		l
NOF	rton, Brend an J								j	,
317	WHITAKER RD.			82	Street Addre	ess (P.O. Box Number is Not Acce	eptable)			i
LUT	Z FL 33549			83						i
				"						i
				84	City		FL	85 Zip (Code	
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statut	es, the a	above	-named corpo	ration submits this statement for t	he nurnose of	changing its	registered ==	,
Omce or i	to the provisions of Sections 607.05 registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered ag	e of Florida. Such change was a pations of, Section 607.0505, Flo	rida Sta	tutes.	tne corporation	n's board of directors, I hereby ac	he nurnose of	changing its intment as reg	registered == gistered	
agent. I a	am familiar with, and accept the oblig	e of Florida. Such change was a pations of, Section 607.0505, Flo	rida Sta	d by t tutes. d Agent	tne comocratior	n's board of directors, I hereby ac	he purpose of cept the appoi	intment as re	gistered	(86)
agent. I a	am familiar with, and accept the oblig	e of Florida. Such change was a jations of, Section 607.0505, Flor ent and title if applicable. (NOTE	rida Stat	d by t tutes.	tne corporation	n's board of directors, I hereby ac	he purpose of cept the appoi	intment as re	gistered	11/98)
agent. I a SIGNATURE	am familiar with, and accept the oblig Signature, typed or printed name of registered ag OFFICERS A	e of Florida. Such change was a lations of, Section 607.0505, Florient and title if applicable. (NOTE	: Registered	d Agent	tne corporation	n's board of directors, I hereby ac	he purpose of cept the appoi	Intrient as reg	RS IN 12	4 (11/98)
agent. I a SIGNATURE 12.	Signature, typed or printed name of registered ag OFFICERS A DPS NORTON, BRENDAN J	e of Florida. Such change was a lations of, Section 607.0505, Florient and title if applicable. (NOTE	: Registered 1.1 To 1.2 N	d Agent	tne corporation	n's board of directors, I hereby ac	he purpose of cept the appoi	Intrient as reg	RS IN 12	
agent. I a SIGNATURE 12. TITLE NAME	Signature, typed or printed name of registered ag OFFICERS A DPS NORTON, BRENDAN J	e of Florida. Such change was a lations of, Section 607.0505, Florient and title if applicable. (NOTE	: Registered 13. 1.1 Ti 12 Ni 1.3 Si	d Agent	ADDRESS	n's board of directors, I hereby ac	he purpose of cept the appoi	Intrient as reg	RS IN 12	
SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered ago OFFICERS A OFFICERS A NORTON, BRENDAN J 317 WHITAKER RD. LUTZ FL 33549	e of Florida. Such change was a lations of, Section 607.0505, Florient and title if applicable. (NOTE	: Registered 13. 1.1 Ti 12 Ni 1.3 Si	d Agent d Agent TILE HAME	ADDRESS	n's board of directors, I hereby ac	he purpose of cept the appoi	Intrient as reg	RS IN 12	CR2E034 (11/98)
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered ag OFFICERS A DPS NORTON, BRENDAN J 317 WHITAKER RD. LUTZ FL 33549	e of Florida. Such change was a lations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of, NOTE NO DIRECTORS	: Registered 13. 1.1 To 1.2 No. 1.3 So 1.4 Co	d Agent Agent TILE AME TITLE TITLE TITLE TITLE TITLE	ADDRESS	n's board of directors, I hereby act	he purpose of cept the appoi	ND DIRECTO	RS IN 12	
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered agon OFFICERS A OFFICERS A DPS NORTON, BRENDAN J 317 WHITAKER RD. LUTZ FL 33549 VPT NORTON, BRENDAN J	e of Florida. Such change was a lations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of, NOTE NO DIRECTORS	: Registered: 13. 1.1 T 1.2 N 1.3 S 1.4 C 2.1 TI 2.2 N	d Agent d Agent TILE IAME TREET A TITLE ITLE IAME	ADDRESS	n's board of directors, I hereby act	he purpose of cept the appoi	ND DIRECTO	RS IN 12	
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered agent, or both, in the Stationard familiar with, and accept the obliging Signature, typed or printed name of registered agency of the Signature, typed or printed name of the Signature, typed or printed name of registered agency of the Signature, typed or printed name of the	e of Florida. Such change was a lations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of, NOTE NO DIRECTORS	: Registered 13.	d Agent d Agent TILE IAME TREET A TITLE ITLE IAME	ADDRESS ADDRESS	n's board of directors, I hereby act	he purpose of cept the appoi	ND DIRECTO	RS IN 12	
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered agon of printed name of printed name of registered agon of printed name of printed name of registered agon of printed name of printed nam	e of Florida. Such change was a lations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of, NOTE NO DIRECTORS	: Registered 13.	d Agent TILE IAME TITLE ITLE IAME TITLE IAME TITLE TIT	ADDRESS ADDRESS	n's board of directors, I hereby act	he purpose of cept the appoi	ND DIRECTO	RS IN 12	
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agon of printed name of printed name of registered agon of printed name of printed name of registered agon of printed name of printed nam	e of Florida. Such change was a lations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of the section for the sectio	: Registerer : 13. 1.1 T 12 N 1.3 S 1.4 C 2.1 TI 2.2 N 2.3 S 2.4 C	d Agent TILE IAME TITLE IAME TITLE IAME TITLE IAME TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE	ADDRESS ADDRESS	n's board of directors, I hereby act	he purpose of cept the appoi	ND DIRECTO Change	RS IN 12 Addition	
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered age of FICERS A OFFICERS A OFFICERS A OFFICERS A NORTON, BRENDAN J 317 WHITAKER RD. LUTZ FL 33549 VPT NORTON, BRENDAN J 317 WHITAKER RD. LUTZ FL 33549 LUTZ FL 33549	e of Florida. Such change was a lations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of the section for the sectio	### Registered ### 13. 1.1 The state of the	d Agent TILE AME STREET A STREET	ADDRESS ADDRESS	n's board of directors, I hereby act	he purpose of cept the appoi	ND DIRECTO Change	RS IN 12 Addition	
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	Signature, typed or printed name of registered age of FICERS A OFFICERS A OFFICERS A OFFICERS A NORTON, BRENDAN J 317 WHITAKER RD. LUTZ FL 33549 VPT NORTON, BRENDAN J 317 WHITAKER RD. LUTZ FL 33549 LUTZ FL 33549	e of Florida. Such change was a lations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of the section for the sectio	: Registered 13.	d Agent TILE AME STREET A STREET	ADDRESS -ZIP ADDRESS -ZIP ADDRESS	n's board of directors, I hereby act	he purpose of cept the appoi	ND DIRECTO Change	RS IN 12 Addition	
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	Signature, typed or printed name of registered age of FICERS A OFFICERS A OFFICERS A OFFICERS A NORTON, BRENDAN J 317 WHITAKER RD. LUTZ FL 33549 VPT NORTON, BRENDAN J 317 WHITAKER RD. LUTZ FL 33549 LUTZ FL 33549	e of Florida. Such change was a lations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of, Section 607.0505, Floridations of the section for the sectio	: Registered 13.	d dy t tutes. d Agent itues, itues, itues, d Agent itue itues, itues i	ADDRESS -ZIP ADDRESS -ZIP ADDRESS	n's board of directors, I hereby act	he purpose of cept the appoi	ND DIRECTO Change	RS IN 12 Addition	
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered age of FICERS A OFFICERS A OFFICERS A OFFICERS A NORTON, BRENDAN J 317 WHITAKER RD. LUTZ FL 33549 VPT NORTON, BRENDAN J 317 WHITAKER RD. LUTZ FL 33549 LUTZ FL 33549	e of Florida. Such change was a pations of, Section 607.0505, Floridations of, Section 607.0505, Floridation for, Section for, S	: Registered 13. 1.1 T	IN TREET A	ADDRESS -ZIP ADDRESS -ZIP ADDRESS	n's board of directors, I hereby act	he purpose of cept the appoi	ND DIRECTO Change Change	RS IN 12 Addition Addition	
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered ago OFFICERS A OFFICERS A OFFICERS A DPS NORTON, BRENDAN J 317 WHITAKER RD. LUTZ FL 33549 VPT NORTON, BRENDAN J 317 WHITAKER RD. LUTZ FL 33549 LUTZ FL 33549	e of Florida. Such change was a pations of, Section 607.0505, Floridations of, Section 607.0505, Floridation for, Section for, S	### Company of the co	d dy t tutes. d Agent TITLE	ADDRESS -ZIP ADDRESS -ZIP ADDRESS	n's board of directors, I hereby act	he purpose of cept the appoi	ND DIRECTO Change Change	RS IN 12 Addition Addition	
Agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered ago OFFICERS A OFFICERS A OFFICERS A DPS NORTON, BRENDAN J 317 WHITAKER RD. LUTZ FL 33549 VPT NORTON, BRENDAN J 317 WHITAKER RD. LUTZ FL 33549 LUTZ FL 33549	ations of, Section 607.0505, Florent and title if applicable. (NOTE DELETE DELETE DELETE DELETE DELETE DELETE	: Registerer 13. 1.1 T 1.2 N 1.3 S 1.4 C 2.1 TI 2.2 N 2.3 S 2.4 C 3.1 TI 3.2 N 3.3 S 3.4 C 4.1 TI 4.2 N 4.3 S1 4.4 CI	IN STREET A AME TREET A	ADDRESS -ZIP -ADDRESS -ZIP -ADDRESS -ZIP -ADDRESS -ZIP -ADDRESS	n's board of directors, I hereby act	he purpose of cept the appoi	ND DIRECTO Change Change Change	RS IN 12 Addition Addition	
Agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME TITLE NAME TITLE	Signature, typed or printed name of registered ago OFFICERS A OFFICERS A OFFICERS A DPS NORTON, BRENDAN J 317 WHITAKER RD. LUTZ FL 33549 VPT NORTON, BRENDAN J 317 WHITAKER RD. LUTZ FL 33549 LUTZ FL 33549	e of Florida. Such change was a pations of, Section 607.0505, Floridations of, Section 607.0505, Floridation for, Section for, S	: Registered 13.	IN COLLECT AND COL	ADDRESS -ZIP -ADDRESS -ZIP -ADDRESS -ZIP -ADDRESS -ZIP -ADDRESS	n's board of directors, I hereby act	he purpose of cept the appoi	ND DIRECTO Change Change	RS IN 12 Addition Addition Addition Addition	
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered ago OFFICERS A OFFICERS A OFFICERS A DPS NORTON, BRENDAN J 317 WHITAKER RD. LUTZ FL 33549 VPT NORTON, BRENDAN J 317 WHITAKER RD. LUTZ FL 33549 LUTZ FL 33549	ations of, Section 607.0505, Florent and title if applicable. (NOTE DELETE DELETE DELETE DELETE DELETE DELETE	: Registered	IN TREET A AME TREET A TREE	ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP	when reinstating) ADDITIONS/CHANGES TO (he purpose of cept the appoi	ND DIRECTO Change Change Change	RS IN 12 Addition Addition Addition	
Agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered ago OFFICERS A OFFICERS A OFFICERS A DPS NORTON, BRENDAN J 317 WHITAKER RD. LUTZ FL 33549 VPT NORTON, BRENDAN J 317 WHITAKER RD. LUTZ FL 33549 LUTZ FL 33549	ations of, Section 607.0505, Florent and title if applicable. (NOTE DELETE DELETE DELETE DELETE DELETE DELETE	: Registered	IN THE MAKE TREET A MITY ST. TITLE AME TREET A MITHER TREET A MITY ST. TITLE AME TREET A MITY ST. TITLE TREET	ADDRESS -ZIP -ADDRESS -ZIP -ADDRESS -ZIP -ADDRESS -ZIP -ADDRESS -ZIP	when reinstating) ADDITIONS/CHANGES TO (he purpose of cept the appoi	ND DIRECTO Change Change Change	RS IN 12 Addition Addition Addition Addition	
Agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered ago OFFICERS A OFFICERS A OFFICERS A DPS NORTON, BRENDAN J 317 WHITAKER RD. LUTZ FL 33549 VPT NORTON, BRENDAN J 317 WHITAKER RD. LUTZ FL 33549 LUTZ FL 33549	ations of, Section 607.0505, Florent and title if applicable. (NOTE ND DIRECTORS DELETE DELETE DELETE	: Registered 13. 1.1 T	IN CONTROL OF TREET A CONTROL OF	ADDRESS -ZIP -ADDRESS -ZIP -ADDRESS -ZIP -ADDRESS -ZIP -ADDRESS -ZIP	when reinstating) ADDITIONS/CHANGES TO (he purpose of cept the appoi	ND DIRECTO Change Change Change	RS IN 12 Addition Addition Addition Addition	
Agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered ago OFFICERS A OFFICERS A OFFICERS A DPS NORTON, BRENDAN J 317 WHITAKER RD. LUTZ FL 33549 VPT NORTON, BRENDAN J 317 WHITAKER RD. LUTZ FL 33549 LUTZ FL 33549	ations of, Section 607.0505, Florent and title if applicable. (NOTE DELETE DELETE DELETE DELETE DELETE DELETE	: Registered	IN THE MAKE TREET A ME	ADDRESS -ZIP -ADDRESS -ZIP -ADDRESS -ZIP -ADDRESS -ZIP -ADDRESS -ZIP	when reinstating) ADDITIONS/CHANGES TO (he purpose of cept the appoi	ND DIRECTO Change Change Change	RS IN 12 Addition Addition Addition Addition	
AGENTALISM SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered ago OFFICERS A OFFICERS A OFFICERS A DPS NORTON, BRENDAN J 317 WHITAKER RD. LUTZ FL 33549 VPT NORTON, BRENDAN J 317 WHITAKER RD. LUTZ FL 33549 LUTZ FL 33549	ations of, Section 607.0505, Florent and title if applicable. (NOTE ND DIRECTORS DELETE DELETE DELETE	: Registered Star 13.	IN THE MAKE TREET A ME TREET A MITY-ST. TILE AME TREET A MITY-ST. TILE TREET A ME TREET A MITY-ST. TILE TREET A MAKE	ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP	when reinstating) ADDITIONS/CHANGES TO (he purpose of cept the appoi	ND DIRECTO Change Change Change	RS IN 12 Addition Addition Addition Addition	
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered ago OFFICERS A OFFICERS A OFFICERS A DPS NORTON, BRENDAN J 317 WHITAKER RD. LUTZ FL 33549 VPT NORTON, BRENDAN J 317 WHITAKER RD. LUTZ FL 33549 LUTZ FL 33549	ations of, Section 607.0505, Florent and title if applicable. (NOTE ND DIRECTORS DELETE DELETE DELETE	: Registered	IN THE MAKE TREET A ME TREET A MITY-ST. TILE AME TREET A MITY-ST. TILE TREET A ME TREET A MITY-ST. TILE TREET A MAKE	ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP	when reinstating) ADDITIONS/CHANGES TO (he purpose of cept the appoi	ND DIRECTO Change Change Change Change	RS IN 12 Addition Addition Addition Addition Addition	

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 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

01/07/99 (813) 277-9536