## 2007 FOR-PROFIT CORPORATION ANNUAL REPORT

## Jan 10, 2007 08:00 AM DOCUMENT # P98000020082 **Secretary of State** 1. Entity Name ONE NET, INC. Principal Place of Business Mailing Address 1440 CORAL RIDGE DR. # 206 1440 CORAL RIDGE DR. # 206 CORAL SPRINGS, FL 33071 CORAL SPRINGS, FL 33071 CR2E034 (11/05) 01072007 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0829573 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BARON, EVAN H DO NOT WRITE 1565 NORTH PARK DRIVE SUITE 100 WESTON, FL 33326 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE D TORGOW, JACK NAME STREET ADDRESS 1440 CORAL RIDGE DR. STE. 206 CITY-ST-ZIP CORAL SPRINGS, FL 33071 U00000581014 01/10/07-80069-025 150.00 DVCO TITLE TORGOW, MARILYN NAME STREET ADDRESS 1440 CORAL RIDGE DR. STE. 206 CITY-ST-ZIP CORAL SPRINGS, FL 33071 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 on trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all objective empowered.

SIGNATURE:

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

BIGHATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/8/07

Daytime Phone ♥

**FILED**