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 # P98000036902

1. Corporation Name

PEOPLE'S NETWORK INTERNATIONAL, CORP.

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90189 021 ***150.00



Principal Place	of Business	Mailing Address					
1617 NORTH FLAGER DRIVE 1617 NORTH FLAGER DRIVE							
SUITE 104					DO NOT WRITE IN THIS SPACE		
WEST PALM BE	EST PALM BEACH FL 33407 WEST PALM BEACH FL 3340				DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed		j
					04/22/1998		
2. Principal Place of Business 2a. Mailing Address				1.10	4. FEI Number		plied For
			x a	010	Not Applicable		t Applicable
Suite, Apt. #, etc.					5. Certificate of Status Desired	□ \$8.75 A	
22 STE 2 27							·
- City & State City & State				³ ر ت	6. Election Campaign Financing	\$5.00	· ·
23 W KQ	im iseach FL	28 tam 10ea	<u> </u>		Trust Fund Contribution	Added to	o Fees
Zip 24 33 C	Country	\vdash \bigcirc	Country	s	8. This corporation owes the curren		□No
<u>24 </u>	10 [25]	29 33480 30	<u> </u>		Personal Property Tax.		LINO
	9. Name and Address of Current	Registered Agent	104	A1	10. Name and Address of New Re	gistered Agent	
1/481	COLUEDEN DEENDA DEE		81	Name			
VAN SCHEPEN, BRENDA DEE				Street Addre	ess (P.O. Box Number is Not Accepted	le)	
1617 NORTH FLAGER DRIVE				1717	N Flagter L	<u> </u>	
SUITE 104			83	STC	3		ļ
WES	T PALM BEACH FL 33407		84	City	9	85 Zin (Corte
			04	ü'est	- Palm Beach	、FL ~ 3	3407
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes, tl	he above-	named corpo	oration submits this statement for the p	urpose 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	· · · · · · · · · · · · · · · · · · ·	ANOTE: D.		alamatura required	1 when reinstating)	DATE	\
40	Signature, typed or printed name of registered agent a OFFICERS AND		13,	aigneture restau ea	ADDITIONS/CHANGES TO OFFI		RS IN 12
12.		DELETE	1.1 TITLE		ADDITIONS/OTIANOZO 10 OT11	☐ Change	☐ Addition
TITLE '	Varschenen Ras	1 - >	1.2 NAME		•		_
NAME	11735 150th CT A	May D		PORTO	,		ļ
STREET ADDRESS	77 -		1.3 STREET A	1			
CITY-ST-ZIP	Supiter = 1 334		1.4 CITY-ST-	ZIP		Change	Addition
TITLE	1	_	2.1 TITLE		,		
NAME	megy, Hector C	·	2.2 NAME				
STREET ADDRESS	1717 N Plaster	,DI 10	2.3 STREET A	ADDRESS (The second second	مة سياسا	Į.
CITY-ST-ZIP	West Palm Beac	L Pl 33107	2. 4 CITY- ST	-ZIP			
, LILLE	• • • • • • • • • • • • • • • • • • • •	DELETE	3.1 TITLE	,		Change	☐ Addition
NAME	· ·		3.2 NAME		·		1
STREET ADDRESS	•		3.3 STREET A	ADDRESS			j
CITY-ST-ZIP	•		3.4. CITY-ST-	-ZIP			
TITLE	_	☐ DELETE	4.1 TITLE			☐ Change	☐ Addition (
NAME .			4. 2 NAME				
STREET ADDRESS			4.3 STREET A	ADDRESS			
			4.4 CITY-ST-			•	
CITY-ST-ZIP		☐ DELETE	5.1 TITLE	- Dr		☐ Change	- Addition
TITLE	<u>,</u>	1	5.2 NAME			0-	_
NAME			5.3 STREET A	ADDRESS .	•		
STREET ADDRESS							
CITY-ST-ZIP			5.4 CITY-ST-	ZIF		Change	Addition
TITLE	•		6.1 TITLE			□ cusude	
NAME			6.2 NAME				
STREET ADDRESS	•		6.3 STREET A	ADORESS			
C/TY-ST-7IP			64 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 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.