02221999-90045-011-\$150.00-\$150.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P98000042999

FILED Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90045 011 ***150.00

ef&i Ne	TWORK SERVICES. INC.	,						
Principal Place	s of Business	Mailing Address			4 i Perlimen) Tim leicht dans mer	et datin Abili Adili di		ella ibri fabi
109 FAULKENBURG ROAD TAMPA PL 33619 TAMPA PL 33619			ROAD		DO NOT V	vRITE IN THIS :	SPACE .	
1 *					3. Date incorporated or Quali	fed		
					05/11/1998			
2. Principal Pi	lace of Business	2a. Mailing Address	5		4. FEI Number			offed For
21		26			59-3511292			Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, et	c.	~==	5. Certificate of Status Desired	1 []	\$8.75 A Fee,Re	
City & State	0	City & State	_		6. Election Campaign Financia	na [*]	_\$5.00 _. 1	
23		28			Trust Fund Contribution		Added to	Fees
Zip	Country	Zip	Count	ry	8. This corporation owes the		ngible □Yes	□Ne
24	25	29	30		Personal Property Tax. 10. Name and Address of Na			
	9. Name and Address of Curre	nt Registered Agent	8	1 Name	- 1011		¥	
SUT	ton, Neal		L	ک ا	UTTON- ONEAL	a adabble \		
	FAULKENBURG ROAD		Į*	2 Street Ad	dress (P.O. Box Number is Not Acc	25 /20	(D)	.
	PA FL 33619		la la	3		- 7 (- c	<u></u>	
			L				85 Zip C	
			1.	4 City	AMPA	FL	33	619
44 Purruent	to the armistans of Sections 607 050	02 and 607.1508, Florida	Statutes, the abo	we-named co	rporation submits this statement for	the purpose of c	hanging its	registered
11. Pursuant	to the provisions of Sections 607.050 egistered agent, or both, in the State	02 and 607.1508, Florida of Florida. Such change	Statutes, the aboves authorized b	we-named co by the corpora	rporation submits this statement for nion's board of directors. I hereby ac	the purpose of controls	hanging its tment as reg	registered pistered
	to the provisions of Sections 607.050 septemed agent, or both, in the State of familiar with, and accept the obligations of the	02 and 607.1508, Florida of Florida, Such change attended, Section 607.058	Statutes, the aboves authorized to 15, Florida Statute	we-named co y the corpora se.	rporation submits this statement for nion's board of directors. I hereby ac	the purpose of o cept the appoin	thanging its tment as res	registered pistered
11. Pursuant office or nagent. I all	to the provisions of Sections 607.050 episterad agent, or both, in the State of familiar with, and accept the object of the obje	02 and 607.1508, Florida c of Florida. Such change attorned. Section 607.060 an erd Siz a applicable.		we-named co by the corpora es.	ared when retretating)	- OATE	<i>I.V.</i>	
	September , youth a selfer bette or refuse to	Fin errd Side of applicable. ND DIRECTORS	(HOTE: Registered A.	we-named co y the corpora es.		- OATE	DIRECTO	RS IN 12
SIGNATURE	OFFICERS AN	En erre size i applicable.	(HOTE: Registered A.	we-named co y the corpora es.	ared when retretating)	- OATE	<i>I.V.</i>	
SIGNATURE.	OFFICERS AND SUTTON, O'NEAL	Fin errd Side of applicable. ND DIRECTORS	13. TE 1.1 TITLE 1.2 NAM	we-named co y the corpora se.	ared when retretating)	- OATE	DIRECTO	RS IN 12
SIGNATURE.	OFFICERS AT D SUTTON, O'NEAL 109 FAULKENBURG ROAD	Fin errd Side of applicable. ND DIRECTORS	13. TE 1.1 TITLE 1.2 NAM 1.3 STRI	we-named copy the corporates.	ared when retretating)	- OATE	DIRECTO	RS IN 12
SIGNATURE. 12. TITLE NAME	OFFICERS AND SUTTON, O'NEAL	Fig. 1-13 Call of applicable. ND DIRECTORS DELE	13. TITLE 1.2 NAM 13. STRI 14 CITY	en signalure requirements of the corporate section of the corporate sec	ared when retretating)	- OATE	DIRECTO	RS IN 12
SIGNATURE. 12. ITTLE MAME STREET MODRESS	OFFICERS AT D SUTTON, O'NEAL 109 FAULKENBURG ROAD	Fin errd Side of applicable. ND DIRECTORS	(NOTE: Registered A: 13. 13. 13. 14. 17.	we-named co. yy the corpora se. E E E E E E -ST-ZP	ared when retretating)	- OATE	DIRECTO	RS IN 12
SIGNATURE. 12. ITTLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AT D SUTTON, O'NEAL 109 FAULKENBURG ROAD	Fig. 1-13 Call of applicable. ND DIRECTORS DELE	PROTE: Residence and A: 13. TÉ 1.1 TITLE 1.2 NAM 1.3 STRI 14 CITY TE 2.1 TITLE 2.2 NAM	we-named co. by the corporates. E E E E E E E T T T T T T T T T T T T	ared when retretating)	- OATE	DIRECTO	RS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AT D SUTTON, O'NEAL 109 FAULKENBURG ROAD	Fig. 1-13 Call of applicable. ND DIRECTORS DELE	PROTE: Residence and As. 13. 14. 12. NAM 13. STRI 14. CITY 21. TITL 22. NAM 23. STRI 23. STRI	we-named co. by the corporates. E E E E E E E T T T T T T T T T T T T	ared when retretating)	- OATE	DIRECTO	RS IN 12
SIGNATURE 12. ITTLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZP	OFFICERS AT D SUTTON, O'NEAL 109 FAULKENBURG ROAD	Figure San & applicable. ND DIRECTORS DELE	(NOTE: Report and A: 13. TÉ 1: TITLE 1:2 NAM 1:3 STRI 1:4 CITY 2:2 NAM 2:3 STRI 2:4 CITY 2:4 CITY	we-named copy the corporates. See Electropress E E E ADDRESS ST. 2P E E E F ADDRESS -ST. 2P	ared when retretating)	- OATE	DIRECTO	RS IN 12
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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 of 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 gibes like empowered.