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Secretary of State

03-04-1999 90149 015 \*\*\*150.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P98000058288

1. Corporation Name

PROSPERITY NETWORK, INC.

Principal Place of Business

5101 COLLINS AVENUE #10-H  
MIAMI FL 33140-2714

Mailing Address

5101 COLLINS AVENUE #10-H  
MIAMI FL 33140-2714

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/30/1998

4. FEI Number

65-084 9229

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 the current year Intangible  
Personal Property Tax.

☐ Yes

☒ No

2. Principal Place of Business

21 5101 Collins Ave #10-H

Suite, Apt. #, etc.

22 Suite #10-H

City & State

23 Miami Beach FL

Zip

24 33140

Country

25 USA

2a. Mailing Address

26 5101 Collins Ave #10-H

Suite, Apt. #, etc.

27 Suite #10-H

City & State

28 Miami Beach FL

Zip

29 33140

Country

30 USA

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

10. Name and Address of New Registered Agent

81 Name

Charles Brent

82 Street Address (P.O. Box Number is Not Acceptable)

5101 Collins Avenue Suite #10-H

83

84 City

Miami Beach

FL

85 Zip Code

33140

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

Charles Brent - President

2/13/99

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D  
NAME BRENT, CHARLES  
STREET ADDRESS 5101 COLLINS AVENUE #10-H  
CITY-ST-ZIP MIAMI FL 33140-2714

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P  
1.2 NAME BRENT, CHARLES  
1.3 STREET ADDRESS 5101 Collins Avenue Suite #10-H  
1.4 CITY-ST-ZIP Miami Beach FL 33140-2726

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 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.

SIGNATURE:

Charles Brent - President 2/13/99 (305)864-8899

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)