PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000107287

1. Corporation Name

SR NETWORKS INC.

FILED May 05, 1999 8:00 am Secretary of State

05-05-1999 90160 046 ***150.00



						<u> </u>		JEBI IEN	E IUES IUEI
Principal Plac	e of Business	Mailing Address			, , , , , , , , , , , , , , , , , , ,				
			1424 SW 17TH TERR.						
MIAMI FL 33145			MIAMI FL 33145			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed			
						12/24/1998		,	
2. Principal P	lace of Business		2a. Mailing Address			4. FEI Number		Appl	ied For
···	NW 25 St	#109	26 7640 NW 29	s st	# 109	59-3546749		Not	Applicable
Suite, Apt.			Suite, Apt. #, etc.			5. Certifcate of Status Desired			Iditional
22	-		27			5. Certificate of Status Desired	Fe	e Req	uired
City & Stat	te		City & State			6. Election Campaign Financing \$5.00 May Be			
23 MIAM	ii, FL		28 Minmi, FL			Trust Fund Contribution	Ad	ded to	Fees
Zip	Country		Zip	_ Cor	intry	8. This corporation owes the current y			.
24 331	22 25 U	<u>s.a.</u>	29 33127 3	30	U.S.A.	Personal Property Tax.		<u> </u>	No
	9. Name and Addre	ss of Current	Registered Agent		81 Name	10. Name and Address of New Regis	tered Agent		
SUAREZ, DANIEL					82 Street Address (P.O. Box Number is Not Acceptable)				
1424 SW 17TH TERR. MIAMI FL 33145									
MIAM	I FL 33 143				83				
					84 City		85	Zip Co	ode
						····			
office or r	registered agent, or both	in the State o	gand 607, 1508, Florida Statutes of Florida. Such change was autions of, Section 607,0505, Floridations	thorized	o by the corporat	poration submits this statement for the purp tion's board of directors. I hereby accept the	appointment	as regi	stered
SIGNATURE	Discourse based as a distant	of registered exect	and title if applicable (NOTE: E	Panistarar	1 Agent signature requi	red when reinstation)	ATE		
12.	Signature, typed or printed name		D DIRECTORS	13.	- Hour afficience Lade	ADDITIONS/CHANGES TO OFFICE		CTOF	S IN 12
TITLE	President.		☐ DELETE	1.1 TI	TLE		☐ Ch		Addition
NAME	Dawiel Suga	eZ		1.2 N	AME				
STREET ADDRESS	1	RR			TREET ADDRESS				
CITY-ST-ZIP	i .	33145			rty-St-ziP				
TITLE			☐ DELETE	2.1 Ti			☐ Ch	ange	Addition
NAME				2.2 N					
STREET ADDRESS					TREET ADDRESS				,
CITY-ST-ZIP	7				CITY-ST-ZIP				
TITLE			☐ DELETE	3 1 TI			☐ Ch	ange	Addition
NAME				3.2 N					
STREET ADDRESS	}			ı	TREET ADDRESS				
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TITLE			☐ DELETE	4,1 TI			☐ Ch	ange	Addition
NAME				4. 2 N	IAME				
STREET ADDRESS					TREET ADDRESS				
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TITLE			☐ DELETE	5.1 TI			☐ Ch	ange	☐ Addition
NAME			- -	5.2 N					
STREET ADDRESS				5.3 \$	TREET ADDRESS				
	[rry-st-zip				
CITY-ST-ZIP			☐ DELETE	6.1 Ti			☐ Ch	ange	Addition
				6.2 N				-	
NAME					TREET ADDRESS				
STREET ADDRESS					TY-ST-ZIP				
CiTY-ST-ZIP	I			0.40	111-01-41r				

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.