2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000067135

Entity Name: AGENCYNET INTERACTIVE, INC.

FILED Apr 10, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

305 S. ANDREWS AVE., STE 202 300 SW 1ST AVE FORT LAUDERDALE, FL 33301

155

FORT LAUDERDALE, FL 33301

Current Mailing Address: New Mailing Address:

305 S. ANDREWS AVE., STE 202 300 SW 1ST AVE

FORT LAUDERDALE, FL 33301 155

FORT LAUDERDALE, FL 33301

FEI Number: 65-0934050 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LENT, RICHARD LENT, RICHARD 305 S. ANDREWS AVE., STE 202 300 SW 1ST AVE

FORT LAUDERDALE, FL 33301 US FORT LAUDERDALE, FL 33301 US

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.

SIGNATURE: JOSEPH PRINCZ 04/10/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

LENT, RICHARD LENT, RICHARD Name: Name:

305 S ANDREWS AVE STE 202 300 SW 1ST AVE | STE 155 Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33301 City-St-Zip: FORT LAUDERDALE, FL 33301

() Delete VSD Title: VSD (X) Change () Addition Title:

PRINCZ, JOSEPH Name: Name: PRINCZ, JOSEPH

305 S ANDREWS AVE STE 202 300 SW 1ST AVE | STE 155 Address: Address: FORT LAUDERDALE, FL 33301 FORT LAUDERDALE, FL 33301 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

VΡ SIGNATURE: JOSEPH PRINCZ 04/10/2007