

2001 UNIFORM BUSINESS REPORT (UBR)

1/

FILED

Feb 19, 2001 8:00 am
Secretary of State

01-26-2001 90057 024 ***150.00

DOCUMENT # P99000072256

1. Entity Name

4NET NETWORKING, CORP.

Principal Place of Business

3399 NW 72ND AVE
SUITE 127
MIAMI FL 33122
US

Mailing Address

3399 NW 72ND AVE
SUITE 127
MIAMI FL 33122
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0948787

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BARBOSA, ANDREA
4410 N.W. 74TH AVE.
MIAMI FL 33166

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so. ☐

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2001 - Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PD
NAME PRANCKEVICIUS, DANIEL ☐ Delete
STREET ADDRESS 4410 N.W. 74TH AVE.
CITY-ST-ZIP MIAMI FL 33166

TITLE STD
NAME PRANCKEVICIUS, DAVID ☐ Delete
STREET ADDRESS 4410 N.W. 74TH AVE.
CITY-ST-ZIP MIAMI FL 33166

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 3399 NW 72 Ave, Ste 127
CITY-ST-ZIP Miami, FL 33122

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 3399 NW 72 Ave, Ste 127
CITY-ST-ZIP Miami, FL 33122

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/11/01

Date

305-999-0081

Daytime Phone #

CR2034 (10/00)