FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S61648

(9)

MULTINET TELECOMMUNICATIONS, INC.

Mailing Address

FILED May 13 1997 8:00am Secretary of State

P O BOX 811689 BOCA RATON FL 33481-8689			P O BOX 811689 BOCA RATON FL 33481-1689				
					3. Date Incorporated or Qualified 06/19/1991	3a. Date of Last Re 07/09/1996	eporl
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address		4. FEI Number	f	pplied For
21		26	26		AF 4040070		ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			60.75	
22		27	27		5. Certificate of Status Desired	90.73 A	
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00	May Bo
23		28			Trust Fund Contribution	Added t	
Zip	Country	Zip	Country		8. This corporation has liability for in	·	
24	25	29	30		Florida Statutes	Yes [ZNo lo	,
ļ	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Reg	istered Agent	
	rta, steven		81 1	Name Q	5 Simms		
1619 JACKSON ST			82	Street Addres	ss (P.O. Box Number is Not Acceptable	6)	
FT MYERS FL 33901				1501	ss (P.O. Box Number is Not Acceptable	4 BMD	,
			83				
			84	Dity		85 Zip 0	Code
			·	العول	2AY BEACH	FL 👸 🧏	5483
11. Pursuant to	o the provisions of Sections 607.0 egistered agent, or both, in the Sta	502 and 607 1508, Florida Stati ite of Florida, Such charge was	utes, the above-n	amed corpo	ration submits this statement for the purity board of directors. Thereby accept	rpose of changing its	s registered
agent I ar	n familiar with and accept the obl	gations of, Section 607.0505,	Jorga Statutes		_		registered
SIGNATURE	Signature, typod or printed name of registered.	agont and title if applicable (NC	Offic Bugisland Agent s	ignature required		(30/97)	
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS	S IN 12
TITLE	D	☐ DELE1E	1.1 TITLE			Change	Addition
NAME	CARTA, DIANE A.		1.2 NAM[]
STREET ADDRESS	6311 WALLIS RD		13 STREET AD	DRESS			[]
CITY-ST-ZIP	WEST PALM BEACH FL		14 CITY - ST - Z	IP			5
TITLE	P	☐ DELETE	2.1 TITLE			☐ Change	Addition C
NAME	CARTA, RICHARD R.		2.2 NAME				
STREET ADDRESS 6401 EAST ROGERS CIRCLE,		e, suité 9	2.3 STREET AD	ORESS			
CITY-ST-ZIP	BOCA RATON FL 33487	7.7.7.6.7.	2 4 Crty-S1-7	nt l			
TALE		☐ DELETE	3.1 1ITLE	AS	SST SECY	☐ Change	Addition
NAME			3.2 NAME		J SIMMS		
STREET ADDRESS			3.3 STREET ADO	ORESS 🔭	1201 GEORGE B	JSH BLVD	
CITY-ST-ZIP			3.4 CITY - ST - 7	T I	XELRAY BEACH, FI	33483	
TITLE		☐ DELETE	4.1 TO LE			☐ Change	Addition
NAME			4. 2 NAME	i			
STREET ADDRESS			4.3 STREET ADE	DRESS			
CITY-ST-ZIP			4.4 CHY- ST- Z	iP			ĺ
TITLE		DELETE	5 1 1HLE			☐ Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADD	ORESS .			
CITY-ST-ZIP			5.4 C/TY-ST-Z	P			
TITLE		☐ DELF1E	6.1 TITLE		777777	Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADD	PRESS			
CITY-ST-ZIP			6.4 CITY - ST - 20	·			Į
	u cartify that the information curve	ind with this filing does not a le	0.5 OH 1 - 01 - 21	<u> </u>	- C		

reported 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 eath; 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.