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

Apr 22 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** V00769 (2) MULTINET, INC. Principal Place of Business Mailing Address 1909 DEBARRY AVE 1909 DEBARRY AVE **ORANGE PARK FL 32073 ORANGE PARK FL 32073** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/17/1991 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3101854 Not Applicable 21 Suite, Apl. #, elc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 30 Personal Property Tax due June 30. Yes 29 10. Name and Address of New Registered Agent g. Name and Address of Current Registered Agent 81 Name GRIFFIN, TERRY L. 1909 DEBARRY AVE 82 Street Address (P.O. Box Number is Not Acceptable) **ORANGE PARK FL 32073** 83 84 City Zip Code В5 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. (NOTE: Registered Agent signature required when reinstating) CR2E034 (10/97 OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETÉ 1.1 TITLE Addition THEF GRIFFIN, TERRY L 1.2 NAME NAME 1909 DEBARRY AVE STREET ADDRESS 1.3 STREET ADORESS ORANGE PARK FL CITY - ST - ZIP 14 CITY - ST - ZIP DELETE Addition TITLE 21 TITLE Change GRIFFIN, TRACEY G NAME 2.2 NAME 1909 DEBARRY AVE 2 3 STREET ADDRESS STREET ADDRESS ORANGE PARK FL CITY-ST-ZIP 2 4 DITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE PASSWATER, CHERYL NAME 3.2 NAME 2142 AZALEA LANE STREET ADDRESS 3.3 STREET ADDRESS ORANGE PARK FL 3.4. CITY-ST-ZIP CITY-ST-ZIP DELFTE Addition Change 4.1 TITLE TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4 4 CITY-ST-ZIP CITY-ST-ZIP DELETE 51 TITLE Change Addition TITLE NAME 5.2 NAME STREET ADORESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-S1-ZIP DELE1E Change Addition TITLE 6.1 TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP

14. Thereby 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 entity with an address

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4/11/58 (904)2789570