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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # V10039

(8)

MEGABYTE RESOURCE CORP.

Principal Place of Business

2212 E 4TH AVE

Mailing Address

2212 E 4TH AVE

FILED Jun 05 1997 8:00am Secretary of State



TAMPA FL 33605			TAMPA FL 33605-5410											
								3	3. Date In 01/24	corporated or 0	Qualified		ate of Last 01/1996	Report
2. Principal Pl	lace of Busine	2a. Mailing	2a. Mailing Address					. FEI Nu				A	pplied For	
21		26	26					59-3	103164			N	ot Applicable	
Sulte, Apt. #, etc.			Suite, A	Suite, Apt #, etc.					5. Certific	ate of Status D	esired			Additional lequired
City & State			⊢ ¬ '	City & State					6. Election Campaign Financing \$5.00 May Be					
Zip		Country	28		Τ .	Country	,			ind Contributio		<u> </u>		to Fees
24	<u> </u>	¬ ·			⊢ ¬	Zourius	1	8		rporation has li		ntangible] Yes = [s. 199.032,
24	9 Name a	ind Address of Curre	29 nt Registered Ar	nent	30	-1-		10		Statutes and Address o				
NDA.		DRAKEFORD, P.A.		90111		81	Name		y			31010104	- agont	··
2212 E 4TH AVE							82 Street Address (P.O. Box Number is Not Acceptable)							
IAM	IPA FL 3360	9 (83								
						100	1							
						84	Cily				-	FL	85 Zip	Code
11. Pursuant to office or reagent. I ar	to the provision egistered age m familiar with	ns of Sections 607.050 nt, or both, in the State i, and accept the oblig	02 and 607.1508, of Florida Such ations of, Section	Florida Statu change was n 607.0505, F	ites, the author lorida S	abov zed by Statute	e-named o y the corpo s.	orporati tration's	ion submi board of	ts this statemen directors. I hen	nt for the p eby accep	urpose of	changing	its registered s registered
SIGNATURE	Signature typed o	printed name of registered ag-	ad and tile if annicabl	o (NC	T(- Pope	tored Are	ent signature re	outrod tetu	en reinelatine			DATE		
12.	Orginators, typeca o		D DIRECTORS	e (14c	<u> </u>	3.	eri signatore d	qorea wii	· · ·	NS/CHANGES	TO OFFIC		DIRECTO	RS IN 12
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NAME		WALTER W		_	- 4	2 NAME							•	
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CITY-ST-ZIP				11 mg	6.	4 CITY - S	ST-ZIP							
14. I do hereb	y certify that	he information supplie	d with this filing	does not qua	lify for t	ne exe	mption sta	ted in S	Section 11	9.07(3)(i), Florid	da Statutes	. I furthe	certify that	the
intermation i am an of appears in	n indicated of lficer or direct n Block 12 or	the information supplied this annual report of or of the corresponding Block 13 if changed, o	r he receiver or t non an altachne	istee on so	πue an wered t leress.	o exec	urate and to	nat my s port as r	signature required l	snan nave the s by Chapter 607	same legal , Florida Si	enect as tatutes; a	ir made ur nd that my	noer oath; tha name

Walter W. Knitter, Dir 04/28/97