

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 16, 1999 8:00 am
Secretary of State

04-16-1999 90001 014 ***150.00

DOCUMENT # V35671

1. Corporation Name
SOLUNET, INC.

1571
Principal Place of Business
1591 ROBERT J CONLAN BLVD
SUITE 100 110
PALM BAY FL 32905
US

Mailing Address
1591 ROBERT J CONLAN BLVD
SUITE 100
PALM BAY FL 32905
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/11/1992

4. FEI Number
59-3124086

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing ☐ \$5.00 May Be
Trust Fund Contribution Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 1571 Robert J. Conlan Blvd

26 Suite, Apt. #, etc.

22 110

27 City & State

23 Palm Bay FL

28 FL

24 32905 25 Country

29 Zip 30 Country

9. Name and Address of Current Registered Agent

WERTHEIMER, HELEN
991 SUNSWEPT
SUITE 100
32905BAY FL 32909

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE VPT ☐ DELETE

NAME WETHEIMER, HELEN

STREET ADDRESS 1571 ROBERT J CONLAN BLVD, STE 110

CITY-ST-ZIP PALM BAY FL 32905

TITLE PS ☐ DELETE

NAME WETHEIMER, MICHAEL

STREET ADDRESS 1571 ROBERT J CONLAN BLVD, STE 110

CITY-ST-ZIP PALM BAY FL 32905

TITLE VPCF ☐ DELETE

NAME CHAMBERLAND, ROGER

STREET ADDRESS 1571 ROBERT J CONLAN BLVD STE 110

CITY-ST-ZIP PALM BAY FL 32905

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby 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 attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/1/98)