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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G09599

(3)

FILED Apr 16 1998 8:00am Secretary of State

CUSTO	OM COMPUTER SYSTEMS/	SOFTWARE, INC.			
Principal Place of Business		Mailing Address			niari 41811 bibil Bibil 6801
% PAUL E. STEPHENS. JR. % PAUL E. STEPHEN					
3307 LITTLE JOE COURT 3307 LITTLE JOE C APOPKA FL 32712 APOPKA FL 32712		3307 LITTLE JOE COUR APOPKA FL 32712	Ц	DO NOT WRITE IN TH	
				3. Date Incorporated or Qualified	
				11/24/1982	
_	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21]	4 -4-	26		59-2238409	Not Applicable
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25	29	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registers	ed Agent
	EPHENS, PAUL E., JR.		81 Name		
3307 LITTLE JOE COURT			82 Street A	Address (P.O. Box Number is Not Acceptable)	
AF	POPKA FL 32712		83		
			53		
			84 City	F	85 Zip Code
11 Durouant	to the provisions of Sections 607.05	02 and 607 1509. Florida Statu	tos the above named		
office or	registered agent, or both, in the State	e of Florida Such change was	authorized by the corp	corporation submits this statement for the purpose oration's board of directors. I hereby accept the a	appointment as registered
	am tamiliar with, and accept the oblig	gations of, Section 607.0505, Fi	orida Statutes.		
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable (NO	I£ Registered Agent signature	required when reinstating) DATE	·
12.	OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	Р	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	STEPHENS, PAUL E JR		1.2 NAME		
STREET ADDRESS	3307 LITTLE JOE CT		1.3 STREET ADDRESS		ļ
CITY-ST-ZIP_	APOPKA, FL 00000	☐ OF LETE	1.4 CITY - ST - ZIP		
TITLE	ATTENDED	☐ DELETE	2.1 TITLE		Change Addition
NAME	STEPHENS, SIGNE M. 3307 LITTLE JOE CT.		2.2 NAME		
STREET ADDRESS	APOPKA FL		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	AFVFIM FL	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
NAME		F-1 ottite	3.2 NAME		CT CHANGE CT MUDICION
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP	1		3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		······································	5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS					ŀ
			6.3 STREET ADDRESS		

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