

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

PROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra K. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L38500 (9)
1. Corporation Name
GOLF SCORING SYSTEMS UNLIMITED, INC.

Principal Place of Business: 8201 S.W. 24TH STREET DAVIE FL 33324
Mailing Address: 8201 S.W. 24TH STREET DAVIE FL 33324-5703

2. Principal Place of Business: 21 | 11600 NW 20th Street | 26. Mailing Address: 26 | SAME
Suite, Apt. #, etc. | Suite, Apt. #, etc.
22 | City & State: 27 | Fort Lauderdale FL | City & State
23 | Zip: 28 | 33323 | Country: 29 | U.S. | Country: 30 |

9. Name and Address of Current Registered Agent
SABRA, RICHARD B ESQ.
4601 SHERIDAN STREET
SUITE 208
HOLLYWOOD FL 33021

10. Name and Address of New Registered Agent
B1 Name: Bertho Boman
B2 Street Address (P.O. Box Number is Not Acceptable): 11600 NW 20th Street
B3
B4 City: Fort Lauderdale FL | B5 Zip Code: 33323

11. Pursuant to the provisions of Sections 607.0002 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. Thereby accept the appointment as registered agent I am familiar with and accept the obligations of Section 607.0606, Florida Statutes.

SIGNATURE: Bertho Boman Pres. BERTHO BOMAN 27 APR 97
DATE: 27 APR 97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD MORRALL, EARL	1.1 TITLE	V17/D
NAME	8201 S.W. 24TH ST.	1.2 NAME	
STREET ADDRESS	DAVIE FL 33324	1.3 STREET ADDRESS	
CITY, ST, ZIP	SD	1.4 CITY, ST, ZIP	
TITLE	BARRET, JOHN	2.1 TITLE	
NAME	8201 S.W. 24TH ST.	2.2 NAME	
STREET ADDRESS	DAVIE FL 33324	2.3 STREET ADDRESS	
CITY, ST, ZIP		2.4 CITY, ST, ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	P/S/D
STREET ADDRESS		3.3 STREET ADDRESS	BERTHO BOMAN
CITY, ST, ZIP		3.4 CITY, ST, ZIP	11600 NW 20th Street
TITLE		4.1 TITLE	Fort Lauderdale FL 33323
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY, ST, ZIP		4.4 CITY, ST, ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY, ST, ZIP		5.4 CITY, ST, ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY, ST, ZIP		6.4 CITY, ST, ZIP	

14. I do 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, on its attachment with an address.

FILED
May 16 1997 8:00am
Secretary of State



3. Date Incorporated or Qualified: 12/20/1989
3a. Date of Last Report: 06/17/1996
4. FID Number: 65-0169999
Applied For: Not Applicable
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.039, Florida Statutes: Yes No

C-27502 (9/96)

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