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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

AIVIV	1998			Secretary of State IVISION OF CORPORATIONS			Secretary of State				
1. Corporation	MENT # (E SYSTEMS INC	339045	(1)								
Principal Plac	ce of Business	Maili	ng Address						II BIBII BIBII BIBII B		
9380 SUNSET DR SUITE B245 MIAMI FL 33173-3251			P O BOX 160129 MIAMI FL 33116-0129 US				T WRITE IN TH	IIS SPACE			
US							te Incorporated or Qu 04/22/1983	alified		ľ	
2. Principal F	Place of Business	2a. N	failing Address				1 Number		— Ar	plied For	
21		26					59-2287522			ot Applicable	
Suite, Apt.	#, etc.	27 S	uite, Apt. #, etc.			5. Ce	rtificate of Status Des	ired 🔲	\$8.75 / Fee Re		
City & Stat	e	28	city & State				ection Campaign Final st Fund Contribution	ncing	\$5.00 Added		
Zip	Countr		ıp	Country	,		is corporation owes o				
24	25			30			rsonal Property Tax d] No	
		ss of Current Register	red Agent	81	Name	10. Na	me and Address of	tew Register	ed Agent		
	S tass un, Peter G. 1 567 Sw 84th Lane	•		82	<u> </u>			<u>.</u>			
MIAMI FL 33173					Street Ad	reet Address (P.O. Box Number is Not Acceptable)					
•	AND MANUE OF THE			83							
				84	City				. 85 Zip (Code	
					1				·L `		
11. Pursuant office or r	to the provisions of Secting the provisions of Secting the section of the section	ions 607.0502 and 607 , in the State of Florida.	.1508, Florida Statut Such change was a	es, the above authorized by	e-named corpo	orporation su pration's boar	ibmits this statement t d of directors. I hereb	or the purpose by accept the a	e of changing its appointment as	s registered registered	
agent. I a	ım tam iliar with, and acc	ept the obligations of, \$	Section 607.0505, Fi	orida Statutei	š. ·						
SIGNATURE	Signature typed or printed nank	of registered agent and title if a	pplicable. (NOT	E: Registered Age	ent signature re	equired when reins	stating)	DATE			
12.	0	FFICERS AND DIRECTO		13.		ADD	ITIONS/CHANGES TO	OFFICERS A	ND DIRECTOR	IS IN 12	
TITLE	PO		DELETE 1.1 TITLE		ļ				Change	Addition	
NAME	STASSUN, PETE			1.2 NAME	1						
STREET ADDRESS	11567 S.W. 84TI MIAMI FL	I LANE		1.3 STREET				921	13-4204	a	
CITY+ST-ZIP TITLE	STD		DELETE	1.4 CITY - 5 2.1 TITLE	ST - ZIP			301	Channe	Addition	
NAME	FEILD, WILLIAM	B JR		2.2 NAME	-				onungo		
STREET ADDRESS	15461 SW 82ND			2.3 STREET	ADDRESS						
CITY-ST-ZIP	MIAMI FL			2. 4 CITY-	ST-ZIP			3315	J-5516]	
TITLE			DELETE	3.1 TETLE					Change	Addition	
NAME				3.2 NAME							
STREET ADDRESS				3.3 STREET	i					}	
CITY-ST-ZIP TATLE			DELETE	4.1 TITLE	ST-ZIP				Change	☐ Addition	
NAME			□ beccir	4. 2 NAME	- 1				Onlings		
STREET ADDRESS				4.3 STREET	ADDRESS					1	
CITY-ST-ZIP				4.4 CITY - S	1						
TITLE		<u></u>	DELETE	5.1 TITLE					Change	Addition	
NAME				52 NAME							
STREET ADDRESS				5.3 STREET							
CITY-ST-ZIP			DELETE	5.4 CITY - S	T-ZIP	<u> </u>		·····	Change	Addition	
TITLE NAME			- Drefit	6.1 TITLE 6.2 NAME	}				Change	☐ Addition	
STREET ADDRESS				6.3 STREET	ADDRESS						
CITY-ST-ZIP				6.4 CITY - S							
	ertify that the informatio	n supplied with this filin	a does not qualify fo			in Section 1	19.07(3)(i) Florida Sta	tutes I further	certify that the	information	

ringlesy carry that the mornation supplied with this timing does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied entual 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 of the receiver of 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 of an attachment with an address.

SIGNATURE:

FILED

Mar 09 1998 8:00am