

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

**FILED**  
**May 19 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
--	---	---

**DOCUMENT # P96000041288 (7)**  
 1. Corporation Name  
**CONNECT SYSTEMS U.S.A., INC.**



Principal Place of Business <b>1168 LUCAYA CIRCLE ORLANDO FL 32824</b>	Mailing Address <b>1168 LUCAYA CIRCLE ORLANDO FL 32824</b>
---	---

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26	<b>c/o JEEVES</b>	<b>05/06/1996</b>	
Suite, Apt #, etc.		Suite, Apt #, etc.		4. FEI Number	
		<b>1970 OSGOLA PKWY #344</b>		<b>59-3379523</b>	
22. City & State		27. City & State		5. Certificate of Status Desired	
		<b>KISSIMMEE FL</b>		<input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
23. Zip		28. Zip		6. Election Campaign Financing	
		<b>34743</b>		<input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
Country		Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
		<b>USA</b>		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

**9. Name and Address of Current Registered Agent**

**LAVIGNE, JAMES R**  
**5401 S KIRKMAN RD, SUITE 500**  
**ORLANDO FL 32819**

**10. Name and Address of New Registered Agent**

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

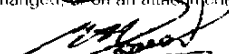
**12. OFFICERS AND DIRECTORS**

TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>DOVER, MICHAEL</b>	
STREET ADDRESS	<b>31 BROOK RD HORSHAM</b>	
CITY-ST-ZIP	<b>WEST SUSSEX RH12 5FS UK</b>	
TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>DOVER, VERA</b>	
STREET ADDRESS	<b>31 BROOK RD HORSHAM</b>	
CITY-ST-ZIP	<b>WEST ESSEX RH12 5FS UK</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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.

SIGNATURE:  **MICHAEL H DOVER** **April 20, 1998.**

CR2E034 (10/97)