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 # 275705

GENERAL SYSTEMS, INC.

1

Principal Place of Business Mailing Address					I leatie sitti tatei eisii 1821 Eski aski aski aski aski aski asti atti atti atti atti atti
4628 BIMINI L	ANE	4628 BIMINI LANE			
WEST PALM	BEACH FL 33417	WEST PALM BEACH FL 33417			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
					11/14/1963
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number Applied For
21		26			59-1101250 Not Applicable
	Suite, Apt. #, etc. Suite, Apt. #, etc.				S8 75 Additional
22		27			5. Certificate of Status Desired Fee Required
	City & State City & State				6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution
Zip	Country	<u>Д</u> р	Country		8. This corporation owes or has paid the current year Intangible
24	25	29	30		Personal Property Tax due June 30. Yes No
	g. Name and Address of Curre	nt registered Agent		31 Name	10. Name and Address of New Registered Agent
	SSALOTTI,RICHARD J			T T T T T T T T T T T T T T T T T T T	
	28 BIMINI LANE		- 1	32 Stree	eet Address (P.O. Box Number is Not Acceptable)
WE	IST PALM BEACH FL 33402			33	
			[3	City	y 85 Zip Code
11. Pursuant I	to the provisions of Sections 607.05	02 and 607.1508. Florida Statut	es the abo	 ove-name	ned corporation submits this statement for the purpose of changing its registered
office or re	egistered agent, or both, in the State	e of Florida, Such change was a	authorized	by the co	med corporation submits this statement for the purpose of changing its registered corporation's board of directors. I hereby accept the appointment as registered
1	m rammar with, and accept the oblig	ganoris or, Socilori doz.0000, Fil	Jilda Statu	165.	
SIGNATURE	Signature, typed or printed name of registered as	jent and title if applicable (NOT	E: Registered	Agent signatu	nature required when reinstating) DATE
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 TITL	E	Change Addition
NAME	VASSALOTTI,RICHARD J		1.2 NAN	AE .	
STREET ADDRESS	4628 BIMINI LANE		1.3 STR	EET ADDRESS	FSS
CITY-ST-ZIP	WEST PALM BEACH FL	— Decer	1.4 CITY-ST-ZIP		
TITLE	SD VACCAL OTTI COMBIE A	☐ DELETE	2.1 7171		☐ Change ☐ Addition
NAME	VASSALOTTI, CONNIE A		2.2 NAN		
STREET ADDRESS	4628 BIMINI LANE			eet address	· · · · · · · · · · · · · · · · · · ·
CITY-ST-ZIP TITLE	WEST PALM BEACH FL	DELETE		Y-ST-ZIP	Change Addition
NAME		FT percit	3.1 TITL 3.2 NAA		Li change Li Addition
STREET ADDRESS				il Eet address	ree
CITY+ST-ZIP				ee i aduress Y-\$t-Zip	
TITLE		DELETE	4.1 TITL		Change Addition
NAME			4. 2 NA		
STREET ADDRESS				eet address	FSS
CITY-ST-ZIP				'-ST- <i>Z</i> IP	·
TITLE		DELETE	5.1 TITE		☐ Change ☐ Addition
NAME			5.2 NAN	1E	
STREET ADDRESS			5.3 \$1R	EET ADDRESS	ESS
CITY-ST-ZIP			5.4 CITY	-ST-21P	
TITLE		DELETE	6.1 TITL	 	☐ Change ☐ Addition
NAME			6.2 NAN	4E	
STREET ADDRESS			6.3 \$TR	eet address	ESS
CITY-ST-ZIP			6.4 CIT	-ST-ZIP	

14. I hereby certify that the information sulplied 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 surplemental 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 convertion or the receiver or trusted 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 all address.

SIGNATURE:

4-03-98

561 686-5798