## 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 #

(8)

## **FILED** Feb 06 1998 8:00am Secretary of State

SOUTHERN CERTIFIED SYSTEMS INC Principal Place of Business Mailing Address 3006 STIRLING ROAD 3006 STIRLING ROAD HOLLYWOOD FL 33021 HOLLYWOOD FL 33021 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/12/1973 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1509661 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees 23 28 Trust Fund Contribution Country Žip Country ZID 8. This corporation owes or has paid the current year Intangible X Yes 24 25 29 30 Personal Property Tax due June 30. ΠNo 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Namo BATTANI, RAYMOND A 10640 NW 18TH COURT 82 Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33322 83 84 City 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, typed or printed name of registered agon) and title if applicable (NOTE: Registered Agent signature required when reinstalling) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change Addition DELETE TITLE 1.1 TITLE BATTANI, RAYMOND ANDREW NAME 1.2 NAME 10640 NW 18TH COURT STREET ADDRESS 1.3 STREET ADDRESS **PLANTATION FL** 1.4 CITY-S1-ZIP CITY-ST-ZIP DELETE Change \_\_\_ Addition TITLE 2.1 THLE BATTANI, SUSAN NAME 2.2 NAME 10640 NW 18TH COURT 2.3 STREET ADDRESS STREET ADDRESS **PLANTATION FL** CITY-ST-ZIP 2.4 CI1Y-S1-ZIP DELETE Change Addition TITLE 3.1 TITLE CROSS, DONNA L. NAME 3.2 NAME 4700 S.W. 34TH AVE. STREET ADDRESS 3 3 STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 3.4, CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE BENSON, NORMA NAME 4. 2 NAME 1831 N 54TH AVE. STREET ADDRESS 4.3 STREET ADDRESS HOLLYWOOD FL CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TOLE 5.1 TITLE KING, ROBERT S JR. NAME 5.2 NAME 4189 SW 23RD ST., #A STREET ADDRESS 5.3 STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 54 CITY-ST-ZIP TITLE DELETE 61 TITLE Change Addition HATCHER, SAM NAME 6.2 NAME **ROUTE 2 BOX 54** STREET ADDRESS **6.3 STREET ADDRESS BRISTOL FL** CITY-ST-ZIP 6.4 CITY- ST- ZIP

14. I hereby certify that the information supplied with the filing 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 supplemental almual 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 empoyered 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

SIGNATURE:

Prosedit

4-967-**07**07