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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUMENT # 639419

(1)

Mailing Address

SYSTEMS CONCEPTS, INC.

FILED Apr 28 1997 8:00am Secretary of State

B MANUS FORM DIE		I BEBU BUCUE D	

ST PETERSBURG FL 33704			ST PETERSBURG FL 33704-1135					
				3. Date Incorporated or Qualified 10/12/1979	3a. Date of Last Report 02/15/1996			
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For			
21		26		59-1949645	Not Applicable			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 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 Added to Fees				
Zip	Zip Country Zip		Country	3				
24	25	29	30	Florida Statutes Yes No				
	9. Name and Address of Cur	rent Registered Agent		10. Name and Address of New Re	gistered Agent			
	lips, rudolph b		81 Name					
955 38TH AVE N			82 Street	82 Street Address (P.O. Box Number is Not Acceptable)				
ST PETERSBURG FL 33704								
			[83]					
			84 City		85 Zip Code			
					FL			
11. Pursuant office or r agent. I a	to the provisions of Sections 607, egistered agent, or both, in the S im lamiliar with, and accept the ol	0502 and 607.1508, Florida Slatut late of Florida Such change was a bigations of, Section 607.0505, Flo	es, the above-named authorized by the corp orida Statutes.	corporation submits this statement for the p poration's board of directors. I hereby accep	urpose of changing its registered of the appointment as registered			
SIGNATURE								
	Signature, typed or printed name of registeres		L. Registered Agent signature	required which reinstating) ADDITIONS/CHANGES TO OFFIC	DATE			
12.		AND DIRECTORS DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFIC	Change Addition			
TITLE	PST DUDOLDU B	bettie			change Addition			
NAME	PHILLIPS, RUDOLPH B 955 38TH AVE N		1.2 NAME					
STREET ADDRESS	ST PETERSBURG FL		1.3 STREET ADDRESS					
CITY-ST-ZIP	V	X DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition			
	PHILLIPS, SUSAN	LES DELEVE	2.2 NAME		E Ondrigo E Visionion			
NAME	955 38TH AVE N							
STREET ADDRESS	ST PETERSBURG FL		2.3 STREET ADDRESS					
CITY-ST-ZIP TITLE	OI PETENODUNG FL	DELFTE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition			
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREET ADDRESS					
			3.4 City-St-ZiP					
CITY-ST-ZIP TITLE		DELCTE	4.1 TIPLE		Change Addition			
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET ADDRESS		ļ			
1			4.4 C(1Y - S1 - ZIP					
CITY-ST-ZIP TITLE		DELLTE	511011		Change Addition			
NAME	•		5.2 NAME					
STREET ADDRESS			5.3 STREET ADDRESS					
CITY-ST-ZIP	,		• 5.4 CHY - ST- ZIP					
TITLE		DELETE	6.1 TITLE		Change Addition			
NAME	1.		6.2 NAME		• • • •			
STREET ADDRESS			6.3 STREET ADDRESS					
CITY-ST-ZIP			6.4 CHY-ST-ZIF					
011120126	I 1 1 1 1		0.9 0011-01-10					

14. I do hereby certify that the information supplied with this filling 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.