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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

F05682

GENERAL SOFTWARE SYSTEMS COMPANY INC

GLITERIAL SOFTTANE STSTEMS COMPANT, INC.				
Principal Place of Business	Mailing Address			
6784 N.W. 17TH AVE. FT. LAUDERDALE FL 33309	6784 NW 17TH AVE Ft. Lauderdale Fl. 3330			

FILED Feb 12 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							
6784 N.W. 17TH AVE. 6784 NW 17TH AVE							
FI. LAUUERI	DALE FL 33309	FT. LAUDERDALE FL 33 US	309			DO NOT WRITE IN THIS SPACE	
		00				3. Date Incorporated or Qualified	_
4 D1 15						11/17/1980	
·	Place of Business	2a. Mailing Address				4. FEI Number Applied For	
Suite, Apt	# oto	26				59-2040523 Not Applicat	ole
22	w, etc.	Suite, Apt #, etc.				5. Certificate of Status Desired S8.75 Additional	
City & Stat	City & State		Fee Required				
23	~	28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Cou	intry		This corporation owes or has paid the current year Intangible	-
24	25	29	30	,		Personal Property Tax due June 30. Yes No	ı
	9. Name and Address of Curre		1991			10. Name and Address of New Registered Agent	
SM	IITH, WAYNE M.			81	Name	: : : : : : : : : : : : : : : : : : :	\neg
37	5 KATHY LANE			82	Stroot A	Address (R.O. Boy Number in Net Assessable)	
M/A	RGATE FL 33068				Street A	Address (P.O. Box Number is Not Acceptable)	
				63			
				84	City	FL 85 Zip Code	\neg
11. Pursuant	to the provisions of Sections 607.05	02 and 607 1508, Florida Statu	tes, the al	oove	e-named o	cornoration submits this statement for the purpose of changing its registers	∌d
Office or r	ogistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change was	authorized	a by	the corp	poration's board of directors. I hereby accept the appointment as registered	¹
SIGNATURE	Signature, typed or profest name of registered ag						_
12.		VD DIRECTORS	13.	Agei	ni eignature r	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	DELETE	1.1 70		Т	Change Addition	00
NAME	Gardner, Lawrence R		1.2 NA				
STREET ADDRESS	-300 TUNNEL MOUNTAIN RD),			ADDRESS	363 Course Turnel Road	
CITY-ST-ZIP	SYLVA NC		1.4 CI				
TITLE	PD	DELETE	2 1 TI			Change Additi	on
NAME	SMITH, WAYNE M.	•	22 NA	ME	1	-	-
STREET ADDRESS	375 KATHY LANE		23 ST	REET	ADDRESS	·	
CITY-ST-ZIP	MARGATE FL		2 4 C	ITY-S	17-ZIP	· ·	
TITLE	VP	DELETE	3.1 Til	LE		☐ Change ☐ Additi	on
NAME	KISTNER, KENNETH F		3.2 NA	ME			- 1
STREET ADDRESS	22312 GARRISON ST		3.3 \$1	AEET /	ADDRESS	:	
CITY-ST-ZIP	BOCA RATON FL		3.4. CI	TY-S	T- Z iP		
TITLE		☐ DELETE	4.1 Til	LE		☐ Change ☐ Additi	on
NAME			4. 2 N/	AME		•	
STREET ADDRESS			4.3 ST	REET /	ADDRESS		
CITY-ST-ZIP			4.4 CI	ry-St	r- ZIP		
TITLE		☐ DELETE	5.1 TIT	LE		☐ Change ☐ Addition	on
NAME			5.2 NA	ME			
STREET ADDRESS			5.3 ST	REE1 /	ADDRESS	:	
CITY-ST-ZIP			5.4 CB	Y-ST	- ŽIP		
TITLE		☐ DELETE	6.1 TIT	1.E		☐ Change ☐ Addition	on
NAME			6.2 NA	ME		,	
STREET ADDRESS			6.3 ST	REET A	ADDRESS	1	- 1
CITY-ST-ZIP	ertify that the information supplied y		6.4 CH			:	╝
THE IDECTOR C						d in Continu 110 07/2/4). Florido Ctatutas, I futbas cautit shat the lafe	

Increay 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, by on an attachment with an address