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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

**Katherine Harris** 

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Feb 01, 1999 8:00am **Secretary of State**

	OIVIEN 1 # F85820 SYSTEMS, INC.	8				17 <b>11/101</b> (10) (4/10) (4/10) (4/10)		NEK ELEK SIEN JES	ı
Principal PI	ace of Business	Mailing Address							
4063 N. GOL SUITE 207 WINTER PAR	DENROD ROAD	120 UNIVERSITY PARK DR. #200 P.O. BOX 4777 WINTER PARK FL 32793				DO NOT WRITE IN THIS SPACE			
US					•	3. Date Incorporated or Qualified 06/17/1982			
2. Principal	2a. Mailing Address	g Address			4. FEI Number		·	_	
21		26				59-2241479	<u> </u>	Applied For	_
Suite, Ap	ot. #, etc.	Suite, Apt. #, etc.						Not Applicable	<u>.</u>
City & St	ate	27				5. Certificate of Status Desired \$8.75 Additional Fee Required			
Zip	<u> </u>	City & State				6. Election Campaign Financing			
			Country			8. This corporation owes the current		ed to rees	
24 25 29 30 30 30 31 31 32 32 32 32 33 34 35 36 36 36 36 36 36 36 36 36 36 36 36 36				_		Personal Property Tax.			
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Re	gistered Agent		-
RAHRER, DEE				81 Na	me	· · · · · · · · · · · · · · · · · · ·			7
2248 OLNEY RD			82 Street Add			Idress (P.O. Box Number is Not Acceptable)			
/ LAK	(ELAND FL 33801			83			<u>., ., 4.,,</u>		
									7
				84 Cit	•		85 12	p Code	1
11. Pursuan	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	s. the at	ove-nan	ed como	ration submits this statement for the pu			_
agent. 1	arri larrillar with, and accept the obliga	of Florida. Such change was aut tions of, Section 607.0505, Florid	horized Ja Statu	by the c tes.	orporation	ration submits this statement for the purish board of directors. I hereby accept to	rpose of changing he appointment as	its registered registered	
SIGNATURE									
12.	Signature, typed or printed name of registered ager	nt and title if applicable. (NOTE: R		Agent signat	ure required v	when reinstating)	DATE	·	_ ا
TITLE	VS	DELETE	13.		· — —	ADDITIONS/CHANGES TO OFFICE	ERS AND DIREC	FORS IN 12	1 8
NAME	AUGUSTINE, REBECCA A	T DEFETE	1.1 Tm	LE .			Chang		
STREET ADDRESS	7952 DUNSTABLE CIR.		1.2 NA	ΝE			1		7
CITY-ST-ZIP	ORLANDO FL		1.3 STF	EET ADDRE	SS		#		8
TITLE	PTD			Y-ST-ZIP			4 4 4		1 5
NAME	AUGUSTINE, KERRY A	☐ DELETE	2.1 T/TL	E	.		☐ Change	Addition	2
STREET ADDRESS	7952 DUNSTABLE CIR.		2.2 NAM	Æ			મું કે		Ì
	ORLANDO FL		2.3 STR	EET ADDRE	ss	ı	1 1	•	ĺ
CITY-ST-ZIP TITLE	D TLANDO FL		2.4 CIT	Y-ST-ZIP		<u>.                                      </u>	li li		
	•	☐ DELETE	3.1 TITL	Ē .			Change	Addition	
NAME	AUGUSTINE, REBECCA A		3.2 NAM	E	1 '	• .			'
STREET ADDRESS	7952 DUNSTABLE CIR.		0.00		1		*1. P		ĺ

C/TY-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 supplimental 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 Block 12 or Block 13 if changed, logor in attachment with an address, with all other like empowered. 6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CiTY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE

ORLANDO FL

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

3.4. CITY-ST-ZIP

4.1 TITLE 4. 2 NAME

DELETE

DELETE

☐ DELETE

Addition

☐ Addition