

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

FILED  
May 12 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F95000001120 (3)

1. Corporation Name  
MICROS OF SOUTH FLORIDA, INC.

Principal Place of Business  
852 SOUTH MILITARY TRAIL  
DEERFIELD BEACH FL 33442  
US

Mailing Address  
14700 SWEITZER LANE  
LAUREL MD 20707  
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

3. Date Incorporated or Qualified

03/09/1995

4. FEI Number

65-0561470

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYS ST, SUITE 105  
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name JAY USYK

82 Street Address (P.O. Box Number is Not Acceptable)  
11522 NORTHWEST 20TH CT

83

84 City CORAL SPRINGS

FL

85 Zip Code 33071

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

*Jay Usyk*  
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

30 APRIL 98

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE  
NAME KOLSON, RONALD J  
STREET ADDRESS 12000 BALTIMORE AVE  
CITY-ST-ZIP BELTSVILLE MD

TITLE PD ☐ DELETE  
NAME HAYMAN, J A  
STREET ADDRESS 14700 SWEITZER LANE  
CITY-ST-ZIP LAUREL MD

TITLE VTC ☐ DELETE  
NAME HAYMAN, RICHARD W  
STREET ADDRESS 14700 SWEITZER LANE  
CITY-ST-ZIP LAUREL MD

TITLE V ☐ DELETE  
NAME CREEGAN, JOSEPH  
STREET ADDRESS 852 SOUTH MILITARY TRAIL  
CITY-ST-ZIP DEERFIELD BEACH FL

TITLE S ☒ DELETE  
NAME DYER, MICHAEL D  
STREET ADDRESS 14700 SWEITZER LANE  
CITY-ST-ZIP LAUREL MD

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DIRECTOR ☒ Change ☐ Addition  
1.2 NAME USYK, JAY  
1.3 STREET ADDRESS 852 SOUTH MILITARY TRAIL  
1.4 CITY-ST-ZIP DEERFIELD BEACH FL 33442

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE SECRETARY ☒ Change ☐ Addition  
5.2 NAME GORDON, CHARLES T.  
5.3 STREET ADDRESS 14700 SWEITZER LANE  
5.4 CITY-ST-ZIP LAUREL MD 20707

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-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 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.

SIGNATURE *Charles T. Gordon* 30 APR 98 301 4130 7111

CR2E034 (10/97)