

pg. 1 of 2

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

| | | |
|---|---|---|
| PROFIT CORPORATION ANNUAL REPORT 1997 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS |
|---|---|---|

DOCUMENT # F95000004090 (5)

1. Corporation Name

PHOENIX SYSTEMS LIMITED CORP.

Principal Place of Business

100 2ND AVE S #1100
ST PETERSBURG FL 33701

Mailing Address

100 2ND AVE S #1100
ST PETERSBURG FL 33701-4338

FILED

97 APR 30 AM 10: 39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



| | | | | | | | |
|--------------------------------|---------------------|---------------------|---------------------|--|--|--|--|
| 2. Principal Place of Business | | 2a. Mailing Address | | 3. Date Incorporated or Qualified 08/23/1995 | | 3a. Date of Last Report 08/12/1996 | |
| 21 | Suite, Apt. #, etc. | 26 | Suite, Apt. #, etc. | 4. FEI Number 59-3291454 | | Applied For Not Applicable | |
| 22 | City & State | 27 | City & State | 5. Certificate of Status Desired <input type="checkbox"/> | | \$8.75 Additional Fee Required | |
| 23 | Zip | 28 | City & State | 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | | \$5.00 May Be Added to Fees | |
| 24 | Country | 29 | Zip | 30 | | 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No | |

9. Name and Address of Current Registered Agent

GORDON, ROBERT P
100 2ND AVE S #1100
ST PETERSBURG FL 33701

10. Name and Address of New Registered Agent

| | |
|----|--|
| 81 | Name |
| 82 | Street Address (P.O. Box Number is Not Acceptable) |
| 83 | |
| 84 | City |
| 85 | 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

Signature of typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|-----------------------------------|---|---|
| TITLE | DC | 1.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | GORDON, ROBERT P | 1.2 NAME | |
| STREET ADDRESS | 234 21ST AVE NE | 1.3 STREET ADDRESS | |
| CITY-ST-ZIP | ST PETERSBURG FL 33704 | 1.4 CITY-ST-ZIP | |
| TITLE | DP | 2.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | XENOPHON, SANDERS L | 2.2 NAME | |
| STREET ADDRESS | 2700 CORDORA WAY S | 2.3 STREET ADDRESS | |
| CITY-ST-ZIP | ST PETERSBURG FL 33712 | 2.4 CITY-ST-ZIP | |
| TITLE | DS | 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | GORDON, VINCENT P | 3.2 NAME | |
| STREET ADDRESS | HONG KONG PKWY, TOWER 4, APT#1831 | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | 88 TAI TAM RD L-4 HONG KONG | 3.4 CITY-ST-ZIP | |
| TITLE | D | 4.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | MELLO, MICHAEL J | 4.2 NAME | |
| STREET ADDRESS | REED HOUSE, 31 CHURCH ST | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | HAMILTON HM 12, BERMUDA | 4.4 CITY-ST-ZIP | |
| TITLE | D | 5.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | MARTIN, PETER D | 5.2 NAME | |
| STREET ADDRESS | REED HOUSE, 31 CHURCH ST | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | HAMILTON HM 12, BERMUDA | 5.4 CITY-ST-ZIP | |
| TITLE | BLOSS, JR., DELBERT F. | 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | 100 2ND AVENUE SOUTH, STE 1100 | 6.2 NAME | |
| STREET ADDRESS | ST. PETERSBURG, FL 33701 | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 6.4 CITY-ST-ZIP | |

14. I do 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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/97

Date

813-894-8021

Daytime Phone #

CR2E034 (9/96)

Phoenix Systems Limited Corp.

Document #F95000004090 (5)

Additional Officers

34647

Vice President

McGee, Larry E.

3700 Ninth Avenue North, Box 24

St. Petersburg, Florida 33713

Vice President

Schafers, Judith A.

165 Fourth Avenue North

Tierra Verde, Florida 33715