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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Apr 24 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9600000410 (8)

HIGH TECHNOLOGY SOLUTIONS, INC.

Principal Place of Business		Mailing Address	Mailing Address					
9865 CHESAPEAKE DRIVE		9665 CHESAPEAKE DRIVE						
STE. 300		STE. 300						
SAN DIEGO CA 92123		SAN DIEGO CA 92123 US	SAN DIEGO CA 92123			DO NOT WRITE IN THIS SPACE		
US		US				3. Date Incorporated or Qualified 01/24/1996		į
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	Ap	plied For
21		26	26			33-0431023	No	t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75	Additional
22		27	27			5. Certificate of Status Desired	Fee Re	quired
City & State		City & State	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28	28			Trust Fund Contribution	Added 1	
Zip	Country	Zip	Counti	у		8. This corporation owes or has paid the curre		
24	25		30			, , , , , , , , , , , , , , , , , , , ,		' No
	9. Name and Address of Curre	nt Registered Agent		_		10, Name and Address of New Registered Ag	gent	·
C T CORPORATION SYSTEM				1	Name			
1200 SO UTH PINE ISLAND ROAD			8:	2	Street Addres	ss (P.O. Box Number is Not Acceptable)		
PU	ANTATION FL 33324						_	
			8:	3				
			8	4	City		85 Zip (Code
				1				
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. Lam familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.								
SIGNATURE								
Signature typed or printed name of registered agent and title if applicable (NOTE Re				egistered Agent signature require				
12.	OFFICERS AT	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND D		
TITLE	CAMAISA, ALLAN J			1.1 TITLE		L	_) Change	Addition
NAME	THEFT ADDRESS 9665 CHESAPEAKE DRIVE, STE. 300			1.2 NAME				l
STREET ADDRESS		31E. 300	1.3 STREET ADDRESS		DDRESS			
CITY-ST-ZIP	SAN DIEGO CA		1.4 CITY - ST - ZIP		ZIP			——————————————————————————————————————
TITLE	ODEEN MONTHAL	☐ DELETE	2.1 TITLE			L	_ Change	Addition
NAME	GREEN, WILLIAM		2.2 NAME					
STREET ADDRESS	9665 CHESAPEAKE DRIVE,	SIE. 300	2.3 STREE	2.3 STREET ADDRESS				
CITY-ST-ZIP	SAN DIEGO CA		2. 4 CITY	- \$ T-	- ZIP			
TITLE	V DILETE		3.1 TITLE				Change	☐ Addition
NAME	BUXBAUM, JANICE			32 NAME				
STREET ADDRESS				3 3 STHEET ADDRESS				
CITY-ST-ZIP	SAN DIEGO CA		3 4. CITY	- \$1-	- ZIP			
TITLE	OFO .	DELETE	4.1 TITLE			· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME	JORDAN, SEAN I		4. 2 NAM	Ε	150	ordan, Sean H.		
STREET ADDRESS	9665 CHESAPEAKE DRIVE,	STE. 300	4.3 STREE	1 A0	I	·		
CITY-ST-ZIP	SAN DIEGO CA		4.4 CITY	ST-	ZIP			
TITLE		DELETE	5.1 TITLE	_			Change	☐ Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREE	T Af	DDRESS			
CITY-ST-ZIP			5.4 CITY-		I .			
TITLE	DELETE		_	61 THLE			Change	Addition
NAME			6.2 NAME		1		-	ļ
STREET ADDRESS			6.3 STREE		DDRESS			

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 trusted 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.