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

Mailing Address

SHITE B-18

3350 NW BOCA RATON BLVD.

BOCA RATON FL 33431-6624

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

SIGNATURE:

SUITE 8-18 BOCA RATON FL 33431

3350 NW BOCA RATON BLVD.



FLORIDA DEPARTMENT OF STATE

FILED

Jan 23 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9600005016 (8)

GROUP PURCHASING SYSTEMS, INC.

3. Date Incorporated or Qualified 3a. Date of Last Report 09/27/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 65-0372231 21 26 Not Applicable Suite Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ZWIEBEL, NORMAN 3350 NW BOCA RATON BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33431** 83 84 City Zip Code 85 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 (NOTE: Registered Agent signature required when reinstating) Signature hypercol protect hank of registered agent and title / applicable DATE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE Change Addition 1.1 TITLE TITLE ZWIEBEL, NORMAN NAME 1.2 NAME 17325 BALBOA PT. WAY 1.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33487** 1.4 CITY - ST - ZIP CITY - ST - ZIP DELETE Change Addition 2 1 TITLE TITLE CLANCY, JOSEPH P NAME 2.2 NAME 2115-I SPRINGHARBOR DR STREET ADDRESS 2.3 STREET ADDRESS **DELRAY BEACH FL 33445** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE ZWIEBEL, WANDA T 3.2 NAME 17325 BALBOA PT. WAY 3.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33487** 3.4. CITY - ST - 2IP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY - ST - 7IP 4.4 CITY - ST - ZIP DELETE Addition 5 1 TILLE Change TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Change ___ Addition 6.1 TITLE TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADORESS 6.4 CITY - ST- ZIP 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.

Ores.

1/6/96 (081)-416-2000