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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F96898

(4)

FILED Apr 29 1998 8:00am Secretary of State

INTEGR	RATED COMPUTER SYS	TEMS, INC.	-			
Principal Plac	e of Business	Mailing Address				
RICHARD LACHOWIT RICHARD LACHOWIT 10115 SW 127TH CT MIAMI FL 33186 MIAMI FL 33186					DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
6 Date 21-11	Nana of During	los Mayor Adda			08/25/1982	
	lace of Business	—	28. Mailing Address		4. FEI Number	Applied For
Sulte, Apt.	# elc		Suite. Apt. #, etc.		59-2212973	Not Applicable
22	n, 510,	27			5. Certificate of Status Desired	Fee Required
City & State	0	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28	28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Cor	Intry	8. This corporation owes or has paid the	current year Intangible
24	25	29	30	,	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Cu	irrent Registered Agent			10. Name and Address of New Register	ed Agent
	CH O WITZ, RICHARD			81 Name		
10115 S.W. 127 COURT				82 Street Ad-	dress (P.O. Box Number is Not Acceptable)	
MIA	MI FL 33186					·
				63		
				84 City		85 Zip Code
44 Durawant	to the provisions of Continue CO?	10000 and 007 1000 Florid	a Statutos, the e	nomed so	eneration submits this statement for the number	
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, typed or printed name of rugstured agent and title if applicable (NOTE Registered Agent signature required when reinstating) OATE						
12.		S AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PD	DEL	.ETE 1.1 TI	TLE		☐ Change ☐ Addition ♀
NAME	LACHOWITZ, RICHARD		1.2 N	AME		2
STREET ADDRESS	10115 SW 127TH CT		1.3 S	TREET ADDRESS		ដ្រ
CITY-ST-ZIP	MIAMI, FL 00000			TY-ST-ZIP		8
TITLE		LJ DEL	ETE 2.1 TI	TLE		☐ Change ☐ Addition ☐
NAME			2.2 N			1
STREET ADDRESS			- 1	ireet address		
CITY-ST-ZIP				ITY-ST-ZIP		Chance Addition
TITLE		∟ DEt		Į.		L Change L Addition
NAME STREET ADDRESS			3.2 N	AME Freet Address		
CITY-ST-ZIP				HY-S1-ZIP		
TITLE		☐ DEL				☐ Change ☐ Addition
NAME			4.21	- 1		
STREET ADDRESS				FREET ADDRESS		
CITY-ST-ZIP				TY-ST-ZIP		
TITLE		DEI				☐ Change ☐ Addition
NAME			5.2 N	AME		
STREET ADDRESS			5.3 St	REET ADDRESS		1
CITY-ST-ZIP				TY-ST-ZIP		
TITLE		DEL	ETE 6.1 TI	TLE		☐ Change ☐ Addition
NAME			6.2 N	AME		
STREET ADDRESS			6.3 ST	REET ADDRESS		
CITY-ST-ZIP				TY-ST-ZIP	0	
14. I nereby of Indicated	certify that the information supplificent this annual report or supplier	ed with this tiling does not d nental annual report is true (quality for the exe and accurate an	emption stated i d that my signat	n Section 119,07(3)(i), Florida Statutes. I further ture shall have the same legal effect as if made	certify that the information under oath; that I am an

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 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 and that my name appears in Block 12 or Block 13 if changed, or on an attachment with all address.

SIGNATURE:

198

745-267-1406