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Jun 02 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 # F97000004998 (7)

1. Corporation Name
OLYMPIA BUSINESS SYSTEMS, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 7451 AIRPORT FREEWAY<br>FORT WORTH TX 76118-6955 | 7451 AIRPORT FREEWAY<br>FORT WORTH TX 76118-6955 |

DO NOT WRITE IN THIS SPACE

| | 2. Principal Place of Business | | 2a. Mailing Address |
|---|---|---|---|
| 21 | 6501 Park of Commerce Blvd. | 26 | 6501 Park of Commerce Blvd. |
| 22 Suite, Apt. #, etc | B110 | 27 Suite, Apt. #, etc. | B110 |
| 23 City & State | Boca Raton, FL | 28 City & State | Boca Raton FL |
| 24 Zip | 33487 | 29 Zip | 33487 |
| 25 Country | USA | 30 Country | |

3. Date Incorporated or Qualified: 09/24/1997

4. FEI Number: 75-2686892 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $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**

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

10. **Name and Address of New Registered Agent**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

| | | |
|---|---|---|
| TITLE | C | ☒ DELETE |
| NAME | GREUSCHOW, HORST W.R. | |
| STREET ADDRESS | 7451 AIRPORT FREEWAY | |
| CITY-ST-ZIP | FORT WORTH TX 76118-6955 | |
| TITLE | D | ☐ DELETE |
| NAME | GEISSLER, WOLF-DIETER | |
| STREET ADDRESS | 7451 AIRPORT FREEWAY | |
| CITY-ST-ZIP | FORT WORTH TX 76118-6955 | |
| TITLE | DTV | ☒ DELETE |
| NAME | BENNEGARD, ANDERS | |
| STREET ADDRESS | 7451 AIRPORT FREEWAY | |
| CITY-ST-ZIP | FORT WORTH TX 76118-6955 | |
| TITLE | P | ☐ DELETE |
| NAME | WELLENBERG, HARALD J | |
| STREET ADDRESS | 7451 AIRPORT FREEWAY | |
| CITY-ST-ZIP | FORT WORTH TX 76118-6955 | |
| TITLE | S | ☐ DELETE |
| NAME | LEHNARDT, DETLEF G | |
| STREET ADDRESS | 911 MAIN ST., STE. 2224 | |
| CITY-ST-ZIP | KANSAS CITY MO 64105 | |
| TITLE | | ☐ DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | | |
|---|---|---|
| 1.1 TITLE | | ☐ Change ☐ Addition |
| 1.2 NAME | | |
| 1.3 STREET ADDRESS | | |
| 1.4 CITY-ST-ZIP | | |
| 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 | 6501 Park of Commerce Blvd. | |
| 4.4 CITY-ST-ZIP | Boca Raton, FL 33487 | |
| 5.1 TITLE | | ☐ Change ☐ Addition |
| 5.2 NAME | | |
| 5.3 STREET ADDRESS | | |
| 5.4 CITY-ST-ZIP | | |
| 6.1 TITLE | | ☐ Change ☐ Addition |
| 6.2 NAME | | |
| 6.3 STREET ADDRESS | | |
| 6.4 CITY-ST-ZIP | | |

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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