

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 20, 1999 8:00 am
Secretary of State

04-20-1999 90288 008 ***150.00

DOCUMENT # F97000006281

1. Corporation Name

PROFESSIONAL SOFTWARE ENGINEERING, INC.



Principal Place of Business

200 GOLDEN OAK COURT, STE 100
VIRGINIA BEACH VA 23452

Mailing Address

200 GOLDEN OAK COURT, STE 100
VIRGINIA BEACH VA 23452

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/01/1997

4. FEI Number

54-1318467

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be

Trust Fund Contribution

Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 477 VIKING DRIVE

Suite, Apt. #, etc.

22 SUITE 400

City & State

23 VIRGINIA BEACH, VA

Zip

24 23452

Country

25

2a. Mailing Address

26 477 VIKING DRIVE

Suite, Apt. #, etc.

27 SUITE 400

City & State

28 VIRGINIA BEACH, VA

Zip

29 23452

Country

30

9. Name and Address of Current Registered Agent

BRETELBAUER, JEFFREY
9851 S THOMAS DR #210
PANAMA CITY FL 32408

10. Name and Address of New Registered Agent

81 Name

HERMAN ROBERTSON

82 Street Address (P.O. Box Number is Not Acceptable)

1116 MICHIGAN AVENUE

83

84 City

LYNN HAVEN

FL

85 Zip Code

32444

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

HERMAN ROBERTSON

4/2/99

12. OFFICERS AND DIRECTORS

TITLE PCD ☐ DELETE

NAME WONG, PAUL K
STREET ADDRESS 200 GOLDEN OAK COURT STE 100
CITY-ST-ZIP VIRGINIA BEACH VA

TITLE VST ☐ DELETE

NAME ADOLPHI, MICHAEL D
STREET ADDRESS 200 GOLDEN OAK COURT STE 100
CITY-ST-ZIP VIRGINIA BEACH VA

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

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

4.4 CITY-ST-ZIP

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

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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PAUL K. WONG

Date

Daytime Phone #

4/14/99

757-431-2480

CR2E034 (1/1/98)