**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## Mar 14, 1999 8:00 am Secretary of State

03-14-1999 90016 044 \*\*\*150.00

1. Corporation	MENT # G4811 DATA SERVICES, INC.	8							
Principal Place of Business Mailing Address						-{	i <b>818</b> ii <b>818</b> ii <b>818</b> ii		
3382 TAMPA ROAD PALM HARBOR FL 34684 US		3382 TAMPA ROAD PALM HARBOR FL 34684 US				DO NOT WRITE IN TH	S SPACE	.— <u></u>	<u> </u>
						3. Date Incorporated or Qualifed			
2. Principal Place of Business		2a. Mailing Address				07/08/1983 4. FEI Number	- TAr	oplied For	ł
21		<del>                                     </del>	26			59-2313483	<b>⊢</b>	ot Applicable	1
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional equired	]
City & State	. <u></u>	City & State				6. Election Campaign Financing		May Be	1
23		28	28			Trust Fund Contribution Added to Fees			
Zip	Country Zip			Country			scorporation owes the current year Intangible		
24 25 9. Name and Address of Curre			29 30			Personal Property Tax.  10. Name and Address of New Registere			-
-	9. Name and Address of Curi	ent Kedistelen Adent		31	Name	To. Halle and Addition of No.			1
HUG			32	Street Addre	ess (P.O. Box Number is Not Acceptable)	·····		┨.	
3382 TAMPA ROAD									۱.
PALK	I HARBOR FL 34684		1	33					}
			1	84	City	F	85 Zip	Code	1
office or reagent. I as	to the provisions of Sections 607.0 agistered agent, or both, in the Sta in familiar with, and accept the obli Signature, typed or printed name of registered is	ite of Florida. Such change was igations of, Section 607.0505, F	authorized I Iorida Statut	by t es.	he corporation	oration submits this statement for the purpose in a board of directors. I hereby accept the app	of changing its ointment as re	registered gistered	
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	ORS IN 12	]
TITLE	PD	☐ DELETE	1.1 TITL	E			☐ Change	☐ Addition	1 3
NAME	HUGHES, JEAN		1.2 NAM	1.2 NAME				~	}
STREET ADDRESS			1.3 STR	1.3 STREET ADDRESS					إز
CITY-ST-ZIP	PALM HARBOR FL			1,4 CITY-ST-ZIP 2,1 TITLE			☐ Change	☐ Addition	∃ է
TITLE							□ cuange		`
NAME			2.2 NAV		ADODESS				
STREET ADDRESS				2.3 STREET ADDRESS					
CITY-ST-ZIP TITLE				3.1 TITLE			☐ Change	Addition	1
NAME		_	3.2 NAME						
STREET ADDRESS			3.3 STRE		ADDRESS			_	<u>.</u>
CITY-ST-ZIP			3.4, CIT	Y-ST	r-zip				Ţ
TITLE		☐ DELETE	4.1 TITLE				Change	Addition	
NAME		4.		4. 2 NAME					
STREET ADDRESS	REET ADDRESS		4.3 STR	4.3 STREET ADDRESS					
CITY-ST-ZIP				4.4 CITY-ST-ZIP			- Chanca		-
TITLE		☐ DELETE	5.1 TITL 5.2 NAM				☐ Change	☐ Addition	
NAME					ADDRESS				-
CTDEET ADDDECC			■ 3.3 3 IT						

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.

5,4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

DELETE

03-01-99-1-727-785-3431

Change

Addition