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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 23 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Corporation	MENT # G6776 ERING DATA SERVICES,	\		
Principal Place	of Rusingee	Mailing Address	······································	
Principal Place of Business ** ROBERT H. PFLUEGER 216 GARFIELD ENTERPRISE FL 32725		1000 SAVAGE COURT SUITE 102 LONGWOOD FL 32750-4988		
				3. Date Incorporated or Qualified 3a. Date of Last Report
2. Principal Pl	ace of Business	2a. Mailing Address		11/04/1983 02/20/1996 4. FEI Number Applied For
21		26		59-29 10930 Not Applicable
Suite, Apt. (#, etc	Suite, Apt. #, etc.	****	5. Certificate of Status Desired \$8.75 Additional
City & State		City & State		Fee Required
City & State	•	28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	This corporation has liability for intangible tax under s. 199.032,
24	25	29	30	Florida Statutes
	9. Name and Address of Curr	ent Registered Agent	81 Name	10. Name and Address of New Registered Agent
	JEGER, ROBERT H.		or ivanie	
	MAITLAND AVE #106 AMONTE SPRINGS FL 32701		82 Street Addr	ress (P.O. Box Number is Not Acceptable)
ALIA	MONIE SPANOS PL 32/01		83	The state of the s
			84 City	FL 85 Zip Code
office or re	o the provisions of Sections 607.0 agistered agent, or both, in the Sta n familiar with, and accept the obl	ite of Florida. Such change was	authorized by the corporat	poration submits this statement for the purpose of changing its registerection's board of directors. I hereby accept the appointment as registered
SIGNATURE				
12.	Signature typed or protect more of registered a OCLUMEDS A	agent and title it applicable (NO) ND DIRECTORS	E. Registered Agent signature require 13.	red when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TOLE	DVP	DELETE	1.1 TITLE	Change Addition
NAME	PFLUEGER, DONALD		1 2 NAME	
STREET ADDRESS	216 GARFIELD RD.		1.3 STREET ADDRESS	
CITY-ST-ZIP	ENTERPRISE FL		1,4 CITY - ST - ZIP	
THELE	D DOCTOR DOCTOR	☐ DELETE	2.1 TITLE	Change Addition
NAME	PFLUEGER, ROBERT		2.2 NAME	
STREET ADDRESS	216 GARFIELD RD. ENTERPRISE FL	· ·	2.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	EMENTINGE FE	DELETE	2.4 CITY-ST-ZIP 3.1 TITLE	Change Addition
NAME			32 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-7IP			3.4. CITY-ST-2IP	
TITLE		DELETE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP		Floritze	4.4 CITY - ST - ZIP	[] (L [] 4000.
TITLE		☐ DELETË	51 TITLE	Change Additio
NAME STREET ADDRESS			5.2 NAME 5.3 STREET ADDRESS	
CITY -ST-ZIP			5 4 CITY-ST-ZIP	
TITLE		DELETE	61 TIFLE	Change Additio
NAME			6 2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY - ST - ZIP	
informatio	o indicated on this annual report of	or supplemental annual report is:	true and accurate and tha	d in Section 119.07(3)(i), Florida Statutes. I further certify that the it my signature shall have the same legal effect as if made under oath; the rt as required by Chapter 607, Florida Statutes; and that my name

ATURE: Donald Privage AND PRIVAGE NAME OF SIGNING GETICES IN MISSETTON 1-10-97 467-830-747