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Jun 04 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **H08733** (8)
1. Corporation Name
DATA INTERNATIONAL SYNERGISTIC COMPANY, INC.



Principal Place of Business

**3800 PROGRESS BLVD
MOUNT DORA FL 32757**

Mailing Address

**3800 PROGRESS BLVD
MOUNT DORA FL 32757-2206**

3. Date Incorporated or Qualified 06/20/1984	3a. Date of Last Report 05/20/1996
4. FEI Number 59-2395772	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 has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

**WELTER, ROBERT K.
3800 PROGRESS BLVD.
MOUNT DORA FL 32757**

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 **PD** ☐ DELETE

NAME **WELTER, R.K.**
STREET ADDRESS **1819 MORRIS ST.**
CITY-ST-ZIP **EUSTIS FL**

TITLE **SD** ☐ DELETE

NAME **MARGARET A. PARENT**
STREET ADDRESS **3800 PROGRESS BLVD**
CITY-ST-ZIP **MOUNT DORA FL 32757**

TITLE **D** ☐ DELETE

NAME **WELTER, MELINDA**
STREET ADDRESS **1819 MORRIS ST.**
CITY-ST-ZIP **EUSTIS FL**

TITLE **TD** ☐ DELETE

NAME **ROBERT K. WELTER III**
STREET ADDRESS **1918 MORRIS ST.**
CITY-ST-ZIP **EUSTIS FL 32726**

TITLE **D** ☐ DELETE

NAME **MICHAEL S. WELTER**
STREET ADDRESS **3800 PROGRESS BLVD**
CITY-ST-ZIP **MOUNT DORA FL 32757**

TITLE **D** ☐ DELETE

NAME **ROBERT K. WELTER SR.**
STREET ADDRESS **3800 PROGRESS BLVD.**
CITY-ST-ZIP **MOUNT DORA FL 32757**

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

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6/4/97

14. I do hereby certify that the information supplied with this filing does not qualify for an 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.

SIGNATURE

SIGNATURE

5/29/97

202-588-1212

CR2E034 (9/96)