

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **H21887** (5)
1. Corporation Name
SMALL BUSINESS SYSTEMS, INC.



Principal Place of Business Mailing Address
12177 SO. DIXIE HIGHWAY
12980 SW 82 AVENUE
MIAMI FL 33156
US

2. Principal Place of Business 2a. Mailing Address
21 **12177 So. Dixie Highway**
22 **MIAMI, Florida**
23 **33156** 24 **Dade**
25 **FL** 26 **US**

3. Date Incorporated or Qualified **09/18/1984** 3a. Date of Last Report **01/30/1995**
4. FEI Number **59-2447745** Applied For
5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**
6. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

PFEIFFER, JAMES V.
15340 S.W. 83RD AVENUE
MIAMI FL 33157

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 607.0602 and 607.1503, 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 607.0605, Florida Statutes.

SIGNATURE

Signature of Registered Agent (must be signed by the agent)

Signature of Registered Agent (must be signed by the agent)

DATE

12. OFFICERS AND DIRECTORS
NAME **DP**
STREET ADDRESS **PFEIFFER, JAMES V.**
CITY-STATE-ZIP **15340 SW 83 AVE**
MIAMI FL
TITLE **DST**
NAME **PFEIFFER, VIRGINIA L.**
STREET ADDRESS **15340 SW 83 AVE**
CITY-STATE-ZIP **MIAMI FL**
NAME
STREET ADDRESS
CITY-STATE-ZIP
NAME
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NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1. TITLE ☐ Change ☐ Addition
2. NAME
3. STREET ADDRESS
4. CITY-STATE-ZIP
5. TITLE ☐ Change ☐ Addition
6. NAME
7. STREET ADDRESS
8. CITY-STATE-ZIP
9. TITLE ☐ Change ☐ Addition
10. NAME
11. STREET ADDRESS
12. CITY-STATE-ZIP
13. TITLE ☐ Change ☐ Addition
14. NAME
15. STREET ADDRESS
16. CITY-STATE-ZIP
17. TITLE ☐ Change ☐ Addition
18. NAME
19. STREET ADDRESS
20. CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

James V. Pfeiffer President
James V. Pfeiffer, President

1/29/96

305-233-0587

CR2E034 (12/95)