

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

FILED
Feb 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **H90533** (1)

1. Corporation Name
GSS COMPUTER MAINTENANCE, INC.

Principal Place of Business
**6784 N.W. 17TH AVE.
FT. LAUDERDALE FL 33309**

Mailing Address
**6784 N.W. 17TH AVE
FT. LAUDERDALE FL 33309
US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/20/1985	
21 Suite, Apt #, etc.	22 City & State	26 Suite, Apt #, etc.	27 City & State	4. FEI Number 59-2653464	Applied For <input type="checkbox"/> Not Applicable
23 Zip	25 Country	28 Zip	30 Country	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**BENNETT, JERRY LEE
4121 121ST TERR., N.
ROYAL PALM BCH. FL 33411**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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 date if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DC	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GARDNER, LAWRENCE R.	1.2 NAME	
STREET ADDRESS	800 TUNNEL MOUNTAIN ROAD	1.3 STREET ADDRESS	363 Cowee Tunnel Road
CITY - ST - ZIP	SYLVA NC	1.4 CITY - ST - ZIP	
TITLE	DV	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMITH, WAYNE M.	2.2 NAME	
STREET ADDRESS	375 KATHY LANE	2.3 STREET ADDRESS	
CITY - ST - ZIP	MARGATE FL	2.4 CITY - ST - ZIP	
TITLE	DP	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BENNETT, JERRY L.	3.2 NAME	
STREET ADDRESS	4121 121ST TERR., N.	3.3 STREET ADDRESS	
CITY - ST - ZIP	ROYAL PALM BCH. FL	3.4 CITY - ST - ZIP	
TITLE	DST	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GARDNER, JENNIFER M.	4.2 NAME	
STREET ADDRESS	800 TUNNEL MOUNTAIN ROAD	4.3 STREET ADDRESS	363 Cowee Tunnel Road
CITY - ST - ZIP	SYLVA NC	4.4 CITY - ST - ZIP	
TITLE	VPO	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	AUAIS, JOSE F JR	5.2 NAME	
STREET ADDRESS	17900 NW 77TH CT	5.3 STREET ADDRESS	
CITY - ST - ZIP	HIALEAH FL	5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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

SIGNATURE:

Wayne M Smith

CR2E034 (1097)