

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Feb 22, 1999 8:00 am  
Secretary of State

02-22-1999 90097 019 \*\*\*150.00

DOCUMENT # H90533

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

3. Date Incorporated or Qualified

12/20/1985

4. FEI Number

59-2653464

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☐

Yes

☐

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

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 ☐ DELETE

NAME  
DC  
GARDNER, LAWRENCE R.  
STREET ADDRESS  
363 COWEE TUNNEL RD  
CITY-ST-ZIP  
SYLVA NC

TITLE ☐ DELETE

NAME  
DV  
SMITH, WAYNE M.  
STREET ADDRESS  
375 KATHY LANE  
CITY-ST-ZIP  
MARGATE FL

TITLE ☐ DELETE

NAME  
DP  
BENNETT, JERRY L.  
STREET ADDRESS  
4121 121ST TERR., N.  
CITY-ST-ZIP  
ROYAL PALM BCH. FL

TITLE ☐ DELETE

NAME  
DST  
GARDNER, JENNIFER M.  
STREET ADDRESS  
363 COWEE TUNNEL RD  
CITY-ST-ZIP  
SYLVA NC

TITLE ☐ DELETE

NAME  
VPO  
AUAIS, JOSE F JR  
STREET ADDRESS  
17900 NW 77TH CT  
CITY-ST-ZIP  
HIALEAH FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

28779

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

33068

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

33411

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

28779

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

33015

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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, with all other like empowered.

SIGNATURE: *[Signature]* REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/08/99

Date

954-972-6210

Daytime Phone #

CR2E034 (1/98)