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Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # J63627
1. Corporation Name
TECHNISOURCE, INC. ✓

Principal Place of Business
1901 WEST CYPRESS CREEK RD.
SUITE 202
FT. LAUDERDALE FL 33309

Mailing Address
1901 WEST CYPRESS CREEK RD.
SUITE 202
FT. LAUDERDALE FL 33309



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip Country
24

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip Country
29

3. Date Incorporated or Qualified
03/25/1987
4. FEI Number
59-2786227 ✓
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 owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent
COLLARD, JOSEPH W
1901 W. CYPRESS CREEK RD.
SUITE 202
FT. LAUDERDALE FL 33309

10. Name and Address of New Registered Agent
81 Name
DIXIE F. NEWTON
82 Street Address (P.O. Box Number is Not Acceptable)
1901 W. CYPRESS CREEK RD
83 SUITE 202
84 City
FT. LAUDERDALE FL 85 Zip Code
33309

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 _____ DATE 2/26/99
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS
TITLE PD DELETE
NAME COLLARD, JOSEPH
STREET ADDRESS 1901 CYPRESS CREEK RD., SUITE 202 401
CITY-ST-ZIP FT. LAUDERDALE FL 33309
TITLE SD DELETE
NAME ROBERTSON, JAMES
STREET ADDRESS 1901 CYPRESS CREEK RD., STE 401
CITY-ST-ZIP FT. LAUDERDALE FL
TITLE DIRECTOR DELETE
NAME C. SHELTON JAMES
STREET ADDRESS 1901 W. CYPRESS CREEK RD STE 202
CITY-ST-ZIP FT. LAUDERDALE, FL 33309
TITLE DELETE
NAME SEE ATTACHED
STREET ADDRESS
CITY-ST-ZIP
TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
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
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

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 _____ DATE 4/30/99 Daytime Phone # 954-493-8601
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR 2004 11108