

PROXY
CORPORATION
ANNUAL REPORT
1999



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

FILED
Jul 09, 1999 8:00 am
Secretary of State

07-09-1999 90022 017 *****8.75
07-09-1999 90022 018 ***550.00

DOCUMENT #

L13083

1. Corporation Name

Engineered Business Systems, Inc.

Principal Place of Business

Mailing Address

4400 W Sample Rd.
Suite 228
Coconut Creek, FL 33073

Same

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

9-01-89

4. FEI Number

65-0137999

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

2. Principal Place of Business

2a. Mailing Address

21 1800 NW 49th St.

26 Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 100

27

City & State

City & State

23 Ft. Lauderdale FL

28

Zip 33309

Country

USA

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Bellezza, Peter J
4250 N AlA #506
N Hutchinson Island, Fl 34949

81 Name Fischer, Harold, S.

82 Street Address (P.O. Box Number is Not Acceptable)

1800 NW 49th St.

83 Ste. 100

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

[Signature]

(NOTE: Registered Agent signature required when reinstating)

6-24-99

DATE

Signature typed or printed name of registered agent and title if applicable.

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE CEO ☒ DELETE

NAME Bellezza, Vito
STREET ADDRESS 3701 Turtle Run Blvd.
CITY-ST-ZIP Coral Springs, FL 33067

1.1 TITLE ☐ Change ☐ Addition

TITLE n ☐ DELETE

NAME Fischer, Harold
STREET ADDRESS 1800 NW 49th St.
CITY-ST-ZIP Ft. Lauderdale, FL 33309

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

TITLE VP ☒ DELETE

NAME Daniels, William
STREET ADDRESS 2088 Augusta
CITY-ST-ZIP Weston, FL 33067

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

TITLE D ☒ DELETE

NAME Sherb, Steve
STREET ADDRESS 805 3rd Ave.
CITY-ST-ZIP NY, NY 10022

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

[Signature]
Harold S. Fischer

6-24-99

954-229-5100
Daytime Phone #