

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

FILED
Feb 24 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # L26542 (5)

1. Corporation Name
CUSTOMWARE GROUP, INC.

Principal Place of Business: **3808 GUNN HWY SUITE #103 TAMPA FL 33624 US**

Mailing Address: **3808 GUNN HWY SUITE #103 TAMPA FL 33624 US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 **7211 N. Dale Mabry Hwy** Suite, Apt. #, etc.
 22 **Suite # 216** City & State
 23 **Tampa, FL** Zip
 24 **33614** County
 25 **Hillsborough**

2a. Mailing Address

26 **7211 N. Dale Mabry Hwy** Suite, Apt. #, etc.
 27 **Suite # 216** City & State
 28 **Tampa, FL** Zip
 29 **33614** County
 30 **Hillsborough**

3. Date Incorporated or Qualified
10/31/1989

4. FEI Number
59-2976941 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 or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

HUBER, DANIEL R.
3808 GUNN HWY, SUITE #103
TAMPA FL 33624

10. Name and Address of New Registered Agent

81 Name **Daniel R. Huber**
 82 Street Address (P.O. Box Number is Not Acceptable) **7211 N. Dale Mabry Hwy.**
 83 **Suite # 216**
 84 City **Tampa** FL 85 Zip Code **33614**

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: **Daniel R. Huber** (Daniel R. Huber) President DATE

12. OFFICERS AND DIRECTORS

TITLE	PSD	<input type="checkbox"/> DELETE
NAME	HUBER, DANIEL R.	
STREET ADDRESS	520 NORTH HERCHEL DRIVE	
CITY-ST-ZIP	TAMPA FL	
TITLE	VTD	<input checked="" type="checkbox"/> DELETE
NAME	KAMADIA, IMRAN	
STREET ADDRESS	6607 DOMINICA COURT	
CITY-ST-ZIP	TAMPA FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PVT/SCM	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	DANIEL R. Huber	
1.3 STREET ADDRESS	7211 N. DALE MABRY HWY. Suite 216	
1.4 CITY-ST-ZIP	TAMPA, FL. 33614	
2.1 TITLE	VTD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	KAMADIA, IMRAN	
2.3 STREET ADDRESS	6607 DOMINICA COURT - TAMPA, FL. 33614	
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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.

SIGNATURE: **Daniel R. Huber** (Daniel R. Huber) 1-12-98 (813) 935-3594

CR2E034 (10/97)