

4-7-95 2104-C
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # M60295 (6)

1. Corporation Name

SYSNET TECHNOLOGIES, INCORPORATED

Principal Place of Business

10362 SW 144TH ST
MIAMI FL 33176

Mailing Address

10362 SW 144TH ST
MIAMI FL 33176

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

10/06/1987

3b. Date of Last Report

04/06/1994

4. FEI Number

65-0008256

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 has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes

☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

CAMPBELL, RICHARD L. DR.
10362 SW 144TH ST
MIAMI FL 33176

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 of person or persons authorized to sign and file this report

Signature of Registered Agent (required when changing)

(Date)

12. OFFICERS AND DIRECTORS

TITLE

P

NAME

CAMPBELL, RICHARD L.

STREET ADDRESS

10362 SW 144TH ST.

CITY, ST, ZIP

MIAMI FL

TITLE

ST

NAME

CAMPBELL, VANESSA

STREET ADDRESS

10362 SW 144TH ST.

CITY, ST, ZIP

MIAMI FL

TITLE

D

NAME

CAMPBELL, JAMES

STREET ADDRESS

RT. 1, BOX 182

CITY, ST, ZIP

HASTINGS FL

TITLE

D

NAME

CAMPBELL, JR., JAMES

STREET ADDRESS

3531 N.W. 41ST TERRACE

CITY, ST, ZIP

GAINESVILLE FL

TITLE

D

NAME

CAMPBELL, ERROL

STREET ADDRESS

1325 S.E. 12TH AVENUE

CITY, ST, ZIP

GAINESVILLE FL

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

☐ Change

☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY, ST, ZIP

21 TITLE

☐ Change

☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY, ST, ZIP

31 TITLE

☐ Change

☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY, ST, ZIP

41 TITLE

☐ Change

☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY, ST, ZIP

51 TITLE

☐ Change

☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY, ST, ZIP

61 TITLE

☐ Change

☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information included 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/2/95 (305) 233-9548
Date Signature