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

-D 10 6 100 0

PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham **ANNUAL REPORT** Secretary of State 1997 **DIVISION OF CORPORATIONS** DOCUMENT # M72586 TSS GROUP, INC. Principal Place of Business Mailing Address 4010 GALT OCEAN DRIVE 4010 GALT OCEAN DRIVE APT \$11 FT LAUDERDALE FL 33308 FT LAUDERDALE FL 33308-6516 3. Date Incorporated or Qualified 3a. Date of Last Report 03/18/1988 01/31/1996 2a. Mailing Address 4. FEI Number 2. Principal Place of Business Applied For 65-0049209 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes X yes \(\square\) No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 BOUTIN, DIANE Y. **SUITE 105** 82 Street Address (P.O. Box Number is Not Acceptable) 5100 BAYVIEW DRIVE FORT LAUDERDALE FL 33308-0459 83 84 City Zip Code 85 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, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition 11]|TLF TITLE **BOUTIN, ROLLANDE** 12 NAME NAME 4010 GALT OCEAN DR #511 STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE **BOUTIN, DIANE** 22 NAME NAME 5100 BAYVIEW DR APT 105 STREET ADDRESS 2.3 STREET ADDRESS FT LAUDERDALE FL 2.4 CITY-S1-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. C/TY - ST - 7/P CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE NAME 4 2 NAME 4.3 STREE1 ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change DELETE Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - \$1 - ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 64 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statules. 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 eath; 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.

96/6)