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

Jun 25 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P19017 (3) CPS SYSTEMS, INC. Principal Place of Business Mailing Address 5005 WEST LAUREL 3400 CARLISLE SUITE 500 SUITE 215 DALLAS TX 75204 **TAMPA FL 33607** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/27/1988 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 21 26 75-1607857 Not Applicable 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 Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes 24 25 29 30 Personal Property Tax due June 30. □ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CT CORPORATION SYSTEM 81 1200 S. PINE ISLAND ROAD 82 Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 84 City Zip Code 85 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature: typed or printed here: of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition 1.1 TiTL€ TITLE KANA, PAUL E NAME 1.2 NAME 3400 CARLISLE STE. #500 STREET ADDRESS 1.3 STREET ADDRESS DALLAS TX 75204 CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE HOOFARD, JAMES K JR NAME 2.2 NAME 3400 CARLISLE STE. #500 STREET ADDRESS 2.3 STREET ADDRESS DALLAS TX 75204 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE ☐ Change Addition TITLE 3.1 TATLE **BOOTH, GORDON D JR** NAME 3.2 NAME 3100 CUMBERLAND CIRLCE STE. #1500 STREET ADDRESS 3.3 STREET ADDRESS **ATLANTA GA 30339** CITY-ST-ZIP 3.4. CITY - ST - ZiP DELETE Change Addition TITLE 4.1 TITLE CORDIER, SID H NAME 4.2 NAME 24 MIDDLE ST. LONDON EC1A7JA 4.3 STREET ADDRESS STREET ADDRESS ENGLAND, UNITED KINGDOM CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5 1 TITLE **Wilson, Brian R** NAME 5.2 NAME 16-25 BASTWICK ST. LONDON EC1V3PS STREET ADDRESS 5.3 STREET ADDRESS ENGLAND, UNITED KINGDOM CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE ☐ Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 64 CITY-ST-ZIP

14. Thereby 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 enjowered 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

**FILED** 

(10/97