FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 AM 10:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P19144** **(5)**

1. Corporation Name

CUSTOM NAVIGATION SYSTEMS SOUTH, INC.

Principal Place of Business	Mailing Address
3200 S. ANDREWS AVE. STE 100 SUITE 100 FT. LAUDERDALE FL 33316	3200 S. ANDREWS AVE. STE 100 SUITE 100 FT. LAUDERDALE FL 33316

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/05/1988	3a. Date of Last Report: 03/16/1994
4. FEI Number: 65-0046659	☐ 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	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

FABRICANT, SCOTT B.
3200 S. ANDREWS AVE.
SUITE 100
FT. LAUDERDALE FL 33316

10. Name and Address of New Registered Agent

81 Name: GRAHAM, JONATHAN
82 Street Address (P.O. Box Number is Not Acceptable): 3200 S. ANDREWS AVENUE
83: SUITE 100
84 City: FT.LAUDERDALE FL 85 Zip Code: 33316

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 _____ 5/4/95
Signature, typed or printed name of registered agent and title if applicable — NOTE: Registered Agent signature required when reinstating — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE	P / D	☒ Change ☐ Addition
NAME	ADAMS, EDWARD M.	12 NAME	MAYER, TOWNSEND E.	
STREET ADDRESS	3200 S. ANDREWS AVE #100	13 STREET ADDRESS	3200 S. ANDREWS AVE #100	
CITY-ST-ZIP	FT. LAUDERDALE FL	14 CITY-ST-ZIP	FT.LAUDERDALE, FL 33316	
TITLE	VD	21 TITLE		☐ Change ☐ Addition
NAME	GRAHAM, JONATHAN	22 NAME		
STREET ADDRESS	3200 S. ANDREWS AVE #100	23 STREET ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL	24 CITY-ST-ZIP		
TITLE	STD	31 TITLE	V	☒ Change ☐ Addition
NAME	FABRICANT, SCOTT B.	32 NAME	RUSSELL, MARK	
STREET ADDRESS	3200 S. ANDREWS AVE #100	33 STREET ADDRESS	3200 S. ANDREWS AVE #100	
CITY-ST-ZIP	FT. LAUDERDALE FL	34 CITY-ST-ZIP	FT.LAUDERDALE, FL 33316	
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		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)(k), 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: _____ 04/29/95 305/764-3679
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL — Date — Daytime Phone #

0225001 CP