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

Mailing Address

SUITE 210

6544 US HWY 41 N

**PROFIT** CORPORATION ANNUAL REPORT

1997

Principal Place of Business

SIGNATURE

6544 US HWY 41 N

SUITE 210



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 31 1997 8:00am

Secretary of State

813-641-3711

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000021787 (5)

## DECISION MANAGEMENT INTERNATIONAL, INC.

APOLLO BEACH FL 33572 US		APOLLO BEACH FL 33572-1706 US			3. Date Incorporated or Qualified 03/19/1993	02/23/1996	
2. Principal Pla	ce of Business	2a. Mailing Address			4. FEI Number		pplied For
21		26			65-0412923 Not Applicable		
Suite, Apt. #	, etc.	Suite, Apt. #, etc.			Certificate of Status Desired		
City & State		City & State			6. Election Campaign Financing		
23 28					Trust Fund Contribution		
Zip	Country	Zıp	Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		
24 25 29 30 9. Name and Address of Current Registered Agent				j Florida Statutes			
R1 Name							
	N, STEPHEN S			TACOBSON, KICHARD A.			
6544 U.S. HWY. 41 NORTH				82 Street Address (P.O. Box Number is Not Acceptable)			
SUITE 210 APOLLO BEACH FL 33572				83 Suite 1700			
1				4 City	TAMPA FL 85 Zip Code 33602		
44 0 000 000 1	the produings of Sections 607.00	502 and 607 1508 Florida Statu	tes the sho	ve-named co		n wassa of shanging	ite registered
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 registored agent. I hereby accept the appointment as registered agent. I am fairly are with and accept the obligations of, Section 607.0505, Florida Statutes.							
agent I am familiar with and ad opt the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE 2	Signature typed or prime I name of registered a	anent and trie if annicable (NO	TE: Registered A	gent signature regi	uked when reinstating)	DATE	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTO	RS IN 12
TITLE	D	DELETE	1,1 TITUE			☐ Change	Addition
NAME	HANN, STEPHEN S		1.2 NAM				
STREET ADDRESS	AND		1.3 STRE	ET ADDRESS			
CITY-ST-ZIP	APOLLO BEACH FL			-ST-ZIP			
TITLE	D	DELETE	2.1 TITLE			☐ Change	Addition
NAME	BEITE TETT TO THE STATE OF THE		2.2 NAM	E			
STREET ADDRESS				ET ADDRESS			
CITY-S1-ZIP	LOUISVILLE KY 40222		2. 4 CITY	-ST-ZIP			
TITLE			3.1 TITLE			Change	Addition
NAME			3.2 NAM	E			
STREE1 ADDRESS			3.3 STRE	ET ADORESS			
CITY - S1 - ZIP		- C Portera		- ST- ZIP		Change	Addition
TITLE		DELETE	4.1 TITL			□1 custilâe	L) Addition
NAME			4. 2 NAN	ET ADDRESS			
STREET ADDRESS							
CITY-ST-ZIP TITLE		DELETE	5.1 TITL	-ST-ZIP		Change	Addition
		- J. J. L.	5.2 NAM	ł			_
NAME CIRCLY ADDRESS				ET ADORESS			!
STREET ADDRESS CITY-S1-ZIP				-ST-ZIP	•		
TITLE		DELETE	6.1 TITL		. ;	Change	Addition
NAME			6.2 NAM	1			
STREET ADDRESS			6.3 STR	ET ADDRESS	+ 4		
PITY CT 7ID	,		64 OTY	-ST-7IP	**		
14. I do hereb	by certify that the information supp	lied with this filing does not qua	lify for the e	xemption stat	ed in Section 119.07(3)(i), Florida Statute	es. I further certify the	at the
informatio I am an of appears i	n indicated on this along the part of ficer or airector of the corporation a Block 12 or Block for I dry now	or supplemental annual report is or the receiver or trustee empo or or an attachment with an ac	true and ac wered to ex ddress.	curate and the ecute this rep	ed in Section 119.07(3)(i), Florida Statuti lat my signature shall have the same leg port as required by Chapter 607, Florida	al ellect as it made u Statutes; and that my	noer oath; that / name