

5-12-98 B 7154 -C  
**FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00**

**FILED**  
**May 12 1998 8:00am**  
**Secretary of State**

<b>PROFIT CORPORATION</b> <b>ANNUAL REPORT</b> <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P93000043872 (9)**  
 1. Corporation Name  
**SOCIOCYBERNETICS, INC.**



Principal Place of Business <b>7260 S.W. 34TH ST. RD. MIAMI FL 33155</b>	Mailing Address <b>7260 S.W. 34TH ST. RD. MIAMI FL 33155</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>06/21/1993</b>	
21. Suite, Apt. #, etc.	22. City & State	25. Suite, Apt. #, etc.	26. City & State	4. FEI Number <b>65-0423061</b>	Applied For Not Applicable
23. Zip	24. Country	27. Zip	28. Country	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
29. Zip	30. Country	29. Zip	30. Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	

**NATIONSCORP REGISTERED AGENTS INC.**  
**526 E PARK AVENUE**  
**SUITE 200**  
**TALLAHASSEE FL 32301**

81. Name	82. Street Address (P.O. Box Number is Not Acceptable)	83.	84. City	85. Zip Code
			<b>FL</b>	

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>CHM</b>	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>HOWARD, BERNARD E</b>	1.2 NAME	
STREET ADDRESS	<b>7320 MILLER DRIVE</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>MIAMI FL</b>	1.4 CITY-ST-ZIP	
TITLE	<b>D</b>	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>HOLLER, GEORGE</b>	2.2 NAME	
STREET ADDRESS	<b>769 BARBER STREET</b>	2.3 STREET ADDRESS	<b>APT 137, 9910 REVERAN RD.</b>
CITY-ST-ZIP	<b>SEBASTIAN FL 32958</b>	2.4 CITY-ST-ZIP	<b>SAN DIEGO, CA, 92124</b>
TITLE	<b>D</b>	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>CORRAL, CELESTINO A</b>	3.2 NAME	
STREET ADDRESS	<b>1185 GOLDEN VALLEY CT</b>	3.3 STREET ADDRESS	<b>199 SW 12th AVE Apt 514</b>
CITY-ST-ZIP	<b>LAWRENCEVILLE GA</b>	3.4 CITY-ST-ZIP	<b>MIAMI FL 33130</b>
TITLE	<b>DS</b>	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>KUNCE, HENRY W</b>	4.2 NAME	
STREET ADDRESS	<b>5025 S.W. 74TH TERRACE</b>	4.3 STREET ADDRESS	
CITY-ST-ZIP	<b>MIAMI FL</b>	4.4 CITY-ST-ZIP	
TITLE	<b>PD</b>	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>HAMMAN, HENRY L</b>	5.2 NAME	
STREET ADDRESS	<b>7260 S.W. 34TH STREET ROAD</b>	5.3 STREET ADDRESS	
CITY-ST-ZIP	<b>MIAMI FL</b>	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby 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; that I am 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 in an attachment with an address.

SIGNATURE: *Henry L. Hamman* **HENRY L. HAMMAN** **5/26/98 (30) 265-2142**

CR2E034 (10/97)