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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P93000058776 (4)

PRECISION SOFTWARE SERVICES, INC.

Principal Place of Business Mailing Address

FILED May 15 1998 8:00am Secretary of State



3. Date Incorporated or Qualified 08/23/1993 2a. Mailing Address 4. FEI Number Applied F 21 26 65-0431971 Not Applied F Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May B	DO NOT WRITE IN THIS SPACE		
Suite, Apt #, etc. Suite, Apt #, etc. City & State City & State Country Zip Country Zip Zip Zib Zib Zib Zib Zib Zib			
Suite, Apt. #, etc. 22 City & State City & State 28 Country Zip Country 29 Country 20 Added to Fees Added to F	or		
Suite, Apt. #, etc. 22 City & State City & State 28 Country Zip Country 29 Country 20 Added to Fees A	cable		
City & State City & State City & State City & State 28 Country Added to Fees Zip Country 25 29 30 Reference Required 6, Election Campaign Financing Trust Fund Contribution Added to Fees 8, This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 9, Name and Address of Current Registered Agent JOHN KANE 4818 CORONADO PKWY CAPE CORAL FL 33904 81 Street Address (P.O. Box Number is Not Acceptable) 83 84 City Street Address (P.O. Box Number is Not Acceptable)	nal		
Trust Fund Contribution Added to Fees Zip Country Added to Fees Zip Country Beginner Interpret Tax due June 30. Yes No 9. Name and Address of Current Registered Agent JOHN KANE 4818 CORONADO PKWY CAPE CORAL FL 33904 Trust Fund Contribution Added to Fees B. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent B1 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable)			
Zip Country 7ip Country 8. This corporation owes or has peid the current year Intangible Personal Property Tax due June 30. Yes No. 9. Name and Address of Current Registered Agent JOHN KANE 4818 CORONADO PKWY CAPE CORAL FL 33904 84 City 85 Tin Corde			
24 25 29 30 Personal Property Tax due June 30. Yes No 9, Name and Address of Current Registered Agent JOHN KANE 4818 CORONADO PKWY CAPE CORAL FL 33904 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City			
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4818 CORONADO PKWY CAPE CORAL FL 33904 82 Street Address (P.O. Box Number is Not Acceptable) 83 RA City			
CAPE CORAL FL 33904 83 84 City 85 Zin Code			
83 R4 City R5 Zin Code			
R4 City R5 Zin Code			
84 City B5 Zip Code			
 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 regist 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 registe agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes. 	tered red		
SIGNATURE			
Signature: typed or puniod 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. THE VPST			
— 11 V)	DOIIION		
NAME WHITNEY, RUSSELL 12 NAME			
STREET ADDRESS 4818 CORONADO PKWY 1.3 STREET ADDRESS			
CITY-ST-ZIP CAPE CORAL FL	ddition		
	udikon		
NAME KANE, JOHN 22 NAME			
STREET ADDRESS 4818 CORONADO PKWY 23 STREET ADDRESS			
CITY-ST-ZIP CAPE CORAL FL 2 4 CITY-ST-ZIP TITLE DELETE 31 TIBLE Change A	ddition		
	ווטוווטנו		
NAME 32 NAME			
STREET ADDRESS 33 STREET ADDRESS			
CITY-S1-ZIP 34.CiTY-S1-ZIP 34.TITLE	ddition		
NAME 4.2 NAME	-3		
CITY-ST-ZIP	ddition		
NAME 52 NAME			
STREET ADDRESS 5.3 STREET ADDRESS			
CITY-ST-ZIP 54 CITY-ST-ZIP			
	ddition		
NAME 62 NAME			
STREET ADDRESS 6.3 STREET ADDRESS			
CITY-S1-ZIP 64 CITY-S1-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. Further certify that the information indicated on this annual report or supplienced 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 deceyer or trusted 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 the flat through with an address.

SIGNATURE:

(941)54Z-8999 4/29/98