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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
Division of Corporations

DOCUMENT # P93000072252 (8)

CONVERGENT DIGITAL SYSTEMS, INC.

Apr 30 1998 8:00am Secretary of State

FILED

Principal Place of Business Mailing Address				r ndolinger tign hande eiste datel datel datisk ballsk haden fildlig bleds abled 1984 folle	
415 MONTGOMERY ROAD 415 MONTGOMERY ROA			D		
SE 105	00011100 Et 20144	STE 105 ALTAMONTE SPRINGS F		DO NOT INDITE IN THIS SPACE	
ALTAMONTE SPRINGS FL 32714 ALTAMONTE SPI			L 32/14	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
				10/08/1993	
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3204763	Not Applicable
Suite, Apt. #, etc.		Suite Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		9. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	T 6	Trust Fund Contribution	
Zip 24	Country	Ζφ	Country	6. This corporation owes or has paid the	e current year Intangible Yes No
24	25 9. Name and Address of Curre	29 ent Registered Agent	[30]	Personal Property Tax due June 30 10. Name and Address of New Registe	
STA	ARR, RONALD E		81 Name		
	ROARING DR 238		20 00 141	(B) D	
ALTAMONTE SPGS FL 32714			82 Street Ad	dress (P.O. Box Number is Not Acceptable)	
712.	THIS ITE OF COTE OF IT		83	· · · · · · · · · · · · · · · · · · ·	
					·····
			84 City	1	FL 85 Zip Code
office or re agent. Lar	o the provisions of Sections 607.05 egistered agent, or both, in the Stat π familiar with, and accept the oblig	e of Florida. Such change was a	authorized by the coroor	rporation submits this statement for the purpo ation's board of directors. I hereby accept the	se of changing its registered appointment as registered
SIGNATURE.	Signature: typica or printed havie, of regularised at	jentand libre Cappesable (NOT	E. Begistered Agent signature req	uired when reinstating) [14]	,TE
12.	OFFICERS AF	AD DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	Р	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	STARR, RONALD E		1.2 NAME		
STREET ADDRESS	676 ROARING DR 238		1.3 STREET ADDRESS		
CITY-ST-ZIP	ALTAMONTE SPGS FL		1.4 CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	
TITLE		DELETE	2 1 TITLE		Change Addition
NAME			2 2 NAME		
STREET ADDRESS			2 3 STREFT ADDRESS		
CITY-ST-ZIP	manuscript of the second of th	DELETE	2 4 CHY-SI-ZIP		Change Addition
TITLE		L. Deter	3 1 TITLE 3 2 NAME		□ cuange □ vanition
STREET ADDRESS			32 NAME 33 STHELT ADDRESS		
City-St-ZiP			3.4. CITY+ST-ZIP		
TITLE		DELETE	4 1 Title		Change Addition
NAME		- Print	4 2 NAME		المالات المالات المالات المالات
STREET ADDRESS			4 3 STHEFT ADDRESS		
CITY-ST-ZIP			4.4 CiTY-ST-ZiP		
TITLE		DELFTE	51 THUE		Change Addition
NAME		_	52 NAME		
STHEET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5 4 CITY-ST-ZIP		
TITLE		DEFELE	61 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME		_	62 NAME		- -
STREET ADORESS			63 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 or the recover or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an artificiant with an address.

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4/21/98 (401) 188.6699

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