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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400036398 (3)

ACCUTECH BUSINESS SYSTEMS, INC.

FILED Mar 31 1997 8:00am Secretary of State



Principal Place 11496 PIERSON SUITE C-5 W PALM BEACH 2. Principal Place 2. 11.36.0	RD. FL 33414	Mailing Address 11360 FORTUNE CIRCLI SUITE E-7 W PALM BEACH FL 334 US  26. Mailing Address 26. AMG		3. Date Incorporated or Qualified 05/13/1994 4. FEI Number 65-0495865	3a. Date of Last Report 05/21/1996  Applied For Not Applicab
Suite, Apt. # 22 Suite		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stale		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
<sup>Zip</sup> 334	9. Name and Address of Currer	Zip 29	Country 30	This corporation has liability for in Florida Statutes      Name and Address of New Rev.	Yes No
STE. WES	F PALM BEACH FL 33414	02 and 607.1508, Florida State of Florida Such change wa	83 Suite 84 W. R	Iress (P.O. Box Number is Not Acceptable O Fortune Cir E 1 Im Beach poration submits this statement for the p tition's board of directors. I hereby accep	FL 85 Zip Code 334/4
SIGNATURE	Salvatulary steed ag		OTE Registered Agent signature requ	ilred when reinstating)	3-24.97
112.  THEE  HAME  STREET ADDRESS  CITY- ST-ZIF	EVANS, SUSAN 11360 FORTUNE CIR., STE E- W PALM BEACH FL	DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFIC	Change Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WINTERBAUER, JEFFREY S 11496 PIERSON RD. SUITE C W PALM BEACH FL 33414	☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	`,	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP		Change Addition
TITLE NAME STREET AODRESS CHY-ST-ZIP		DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		Change Addition
THEE NAME STHEET ADDRESS CITY-ST-7/P		DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		Change Addition
THEF NAME SIRGET ADDRESS ONY-ST-ZIP		☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		Change Addition

. I do hereby certify that the information supplied with this filing does not quality 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 oursector of the corporation or the receiver or Irustee 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 anyaddress.

SIGNATURE:

AT UNE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-20-97 (54)793-0503