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Jul 23 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P94000056059 (6)**

1. Corporation Name
SYSNET CONSULTING SERVICES, INC.

Principal Place of Business
**4409 AMBERWOOD CIRCLE
PACE FL 32571**

Mailing Address
**4409 AMBERWOOD CIRCLE
PACE FL 32571**



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/27/1994

59-3258463

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

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9. Name and Address of Current Registered Agent

**HAM, WILLIAM H
4409 AMBERWOOD CIRCLE
PACE FL 32571**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature: typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **C** ☐ DELETE
NAME **HAM, MARTHA K**
STREET ADDRESS **4409 AMBERWOOD CIRCLE**
CITY-ST-ZIP **PACE FL 32571**

TITLE **VC** ☐ DELETE
NAME **PRESSLEY, DENISE J**
STREET ADDRESS **40 LAKE CIRCLE 1966 BISCAYNE BLVD**
CITY-ST-ZIP **MARY-ESTHER FL 32660 NAVARRE FL 32566**

TITLE **D** ☒ DELETE
NAME **REANEY, SANDRA H**
STREET ADDRESS **7704 N.W. 5TH ST., APT. 2G**
CITY-ST-ZIP **PLANTATION FL 33324**

TITLE **PRESIDENT + CFO** ☐ DELETE
NAME **WILLIAM HAM**
STREET ADDRESS **4409 AMBERWOOD CIRCLE**
CITY-ST-ZIP **PACE FL 32571**

TITLE **VP + SECRETARY** ☐ DELETE
NAME **JOHN PRESSLEY**
STREET ADDRESS **1966 BISCAYNE BLVD**
CITY-ST-ZIP **NAVARRE, FL 32566**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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 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 on an attachment with an address

SIGNATURE: **William Ham** (William Ham) 4/30/98 854-994 2285

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