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 # P94000072028 (1)

SYSTEMS MANAGEMENT SPECIALISTS, INC.

Mailing Address Principal Place of Business 11701 SW 1ST STREET 11701 SW 1ST STREET PLANTATION FL 33325 PLANTATION FL 33325

FILED Jan 16 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

		•					3. Date Incorporated or Qualified 09/30/1994									
2. Principal Place of Business				2a. Mailing Address						4. FEI Number				Applied For		
21				26						65-0527389				Not Applicable		
Suite, Apt. #, etc.				Suite, Apt. #, etc.					,	5. Certificate of Status Desired S8.75 Additional Fee Required						
City & State				City & State					1	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution						
23				28				intry		Trust Fund Contribu		<u> </u>				
Zip	-	Country		├ ──			unay		1	8. This corporation ov			rent year] Yes			
24	25			29 30				**	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent					140		
	CHAY, ALLA															
5310 NW 33RD AVENUE							82	Street Ad	Address (P.O. Box Number is Not Acceptable)							
STE. 100 FORT LAUDERDALE FL 33309							83									
, C.O., <u>C.</u>C.O.						7	84	City				FL	85 2	Zip C	ode	
		/ A		007 4F00 F	de Otende	11	1		~~~~	tion outpoits this state	mont for the n	urnose of	chancin	o ite	registered	
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.																
agent. I an	n familiar with	, and accept the obli	igations o	of, Section 607	.0505, Flor	ida Statu	ıtes									
SIGNATURE																
	Signature, typed or	printed name of registered a			(NOTE.		Age	nt signature rec	quired wt	hen reinstating)	-0 +0 OFFIO	DATÉ	DIDEC	-	3 101 40	
12.	_ ₅	OFFICERS A	ND DIRE		ELETE	13.	-			ADDITIONS/CHANG	ES IO OFFIC	ERS ANL	Chan		Addition	
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NAME	GALT, DONALD R			1.2 N												
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CITY-ST-ZIP	PLANTATION FL 33325						1.4 CITY - ST- ZIP						7-1			
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NAME	AE			3.2			3.2 NAME									
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City - ST - ZiP					1	3.4. CIT	ry-s	T-ZIP								
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NAME						4, 2 NA	ME									
STREET ADDRESS						4.3 STF	REET	ADDRESS								
C!TY-ST-ZIP						4.4 CIT	Y-57	r-zip								
TITLE					ELETE	5.1 TITI	LE						Char	ige	Addition	
NAME						5,2 NAI	ME									
STREET ADDRESS						5.3 STF	REET	ADDRESS								
CITY-ST-ZIP						5.4 CIT	Y-\$	T-ZIP								
TITLE					ELETE .	6.1 TITI							Char	ige	Addition	
NAME						6.2 NA	ME				•					
STREET ADDRESS						6.3 STF	REET	ADDRESS								
CITY_61_71B						64 CIT	Y-5	T- <i>Z</i> IP								
14. I hereby c	ertify that the	information supplied	with this	filing does no	t qualify for	the exe	mpl	tion stated	in Sec	ction 119.07(3)(i), Flori	da Statutes. I	further ce	rtify that	the	information	

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.