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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000079036 (7)

FILED Feb 09 1998 8:00am Secretary of State

SYSTEM INTEGRITY CONSULTING, INC.								
				1	HARAMAN HE WAR GOOD BOOK BANK SAN		1 88 81 111	1
1		Mailing Address						
10402 NW 5TH MANOR 10402 NW 5TH MANOR				·				
PLANTATION FL 33324 PLANTATION FL			,		DO NOT WRITE	IN THIS SPA	CE	
]				ŀ	3. Date Incorporated or Qualified			
				1	10/27/1994			•
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		Ar	plied For
21		26			65-0528292		No	t Applicable
Suite, Apt #, etc		Suite, Apt. #, etc.			5. Certificate of Status Desired	D		Additional
22		27					Fee Re	<u> </u>
City & State		City & State			6. Election Campaign Financing			May Be
Z ip		28	Country		Trust Fund Contribution		Added I	
24	Country	Zip	 -1 '	i	8. This corporation owes or has pa			angible] No
24	25 9. Name and Address of Curren		30		Personal Property Tax due June 10. Name and Address of New Re			J 140
04	Y, JACK A	W. 1-Asignation whole	81 Na		10. Tallio allo Morioss of 1104 No	Arecolan vão		
	17, JACK A 102 NW 5TH MANOR							
	NTATION FL 33324		82 Str	eet Address	s (P.O. Box Number is Not Acceptab	le)		
"	111A11011 FC 33324	•	83					
)			1_1			· · · · · · · · · · · · · · · · · · ·		
			84 Cit	У		FL 8	5 Žip (Code
11, Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statute	s, the above-nar	ned corpora	ation submits this statement for the p		anging It	s registered
office or t	to the provisions of Sections 607.050 egistered agent, or both, in the Statum familiar with, and accept the oblig	of Florida, Such change was au	uthorized by the	corporation	's board of directors. I hereby accep	ot the appoint	ment as	registered
ľ	or remain the contract the comp	iniona or, occinor cor 15500, 1101	icia olaratos.					
SIGNATURE	Signature, typed or product name of registered agr	ont and lifte if applicable (NOTE	Registered Agent sign	nature required v	when reinstating)	DATE		
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC			
TITLE	D	☐ DELETE	1.1 TITLE				Change	☐ Addition
NAME	GAY, JACK A		1.2 NAME	ļ				
STREET ADDRESS	10402 NW 5TH MANOR		1.3 STREET ADDRI	FSS				
CITY-ST-ZIP	PLANTATION FL 33324		1.4 CITY-ST-ZIP		······································			
TITLE	D	L_J DELETE	2.1 TiTLE	į	•		Change	L. Addition
NAME	GAY, FAY H		2.2 NAME	ł				
STREET ADDRESS	10402 NW 5TH MANOR		2.3 STREET ADDRE	ESS	•			Ī
CITY-ST-ZIP	PLANTATION FL 33324	Dorotte	2. 4 CHTY-ST-ZIP				Char	Addison
TITLE		☐ DELETE	3.1 TITLE	'			Change	☐ Addition
NAMÉ DERET ADDOCOS			3.2 NAME					
STREET ADDRESS			3.3 STREET ADDRE	:55				}
CITY-ST-ZIP TITLE		DELETE	3.4. City-St-ZiP				Change	Addition
NAME			4.7 IHLE				Simily 0	- Addition
STREET ADDRESS			4. 2 NAME 4.3 STREET ADDRE					\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
1 !				:55	×.			
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE				Change	Addition
NAME		Last vaccion	5.2 NAME	1				
STREET ADDRESS			5.3 STREET ADDRE	22:				
CITY-ST-ZIP			5.4 CITY-ST-ZIP					
TITLE		DELETE	6.1 TITLE				Change	Addition
NAME			6.2 NAME					
STREET ADDRESS			6 3 STREET ADDRE	ss]
CITY-ST-ZIP			6.4 CITY-ST-ZIP]				Ì
								

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 supplicated 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 op any attachment with an address

SIGNATURE: