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**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9400094081 (4)

BUSINESS INFORMATION TECHNOLOGIES CONSULTING, IN

## FILED Apr 03 1998 8:00am Secretary of State



| Principal Place  | e of Rusiness   | Mailing Address                      |                           |               |            |                                      |   | ( <b>9</b> 14)(1 6(6)) <b>98(6</b> ) (8 | J881 1181 1881         |  |  |
|--|---|--------------------------------------|---------------------------|---------------|------------|--------------------------------------|---|---|------------------------|--|--|
|  |   | *                                    | BIVE                      |               |            |                                      |   |   |                        |  |  |
| 19366 E. COUNTRY CLUB DRIVE 19366 E COUNTRY CLUB DRIVE AVENTURA FL 33180 AVENTURA FL 33180 |   |                                      |                           |               |            |                                      |   |   |                        |  |  |
| US US  |   |                                      |                           |               |            | DO NOT WRITE IN THIS SPACE.          |   |   |                        |  |  |
|  |   |                                      |                           |               |            | 3. Date Incorporate                  | d or Qualified                              |   |                        |  |  |
|  |   |                                      |                           |               |            | 01/01/1995                           |   |   |                        |  |  |
|  | ace of Business   | 2a. Mailing Address                  | ۸. ۱                      |               |            | 4. FEI Number                        | _   | <u> </u>                                | pplied For             |  |  |
| 21 2770  |   | 26 2770 NE 15<br>Suite, Apt. #, etc. | 5t. ;=                    | VI CI         | 以          | 65-054390                            | )   |   | ot Applicable          |  |  |
| Suite, Apt.  | : 102   | 27 Sutc 102                          |                           |               |            | 5. Certificate of Sta                | tus Desired                                 | ,                                       | Additional<br>lequired |  |  |
| City & State   | Invderdale FL   | City & State 28 Fort Luxderdale, FL  |                           |               |            | 6. Election Campaignust Fund Control |   | \$5.00 May Be Added to Fees             |                        |  |  |
| Zip  | Country   | 7ip                                  | Country                   |               |            | 8. This corporation                  | owes or has paid th                         | c current year in                       | tangible               |  |  |
| 24 33309   |   | 29 33304 30                          | o U                       | <b>)</b>      |            |                                      | y Tax due June 30.                          |   | □No                    |  |  |
|  | 9. Name and Address of Current  | Registered Agent                     |                           | r             |            | 10. Name and Addr                    | ess of New Registe                          | red Agent                               |                        |  |  |
| BERZOK, ERIC A 81 Name C   |   |                                      |                           |               |            | sic A. Ba                            | erzok                                       |   |                        |  |  |
|  | 19366 E COUNTRY CLUB DRIVE B2 Street A  |                                      |                           |               |            |                                      | Address (P.O. Box Number is Not Acceptable) |   |                        |  |  |
| AVE  | ENTURA FL 33180   |                                      | <u> 720</u>               | NE 15th       | S+ , #10   | )2                                   |   |   |                        |  |  |
|  |   |                                      | 63                        | ]             |            |                                      | •   |   |                        |  |  |
|  |   |                                      | 84                        | City          | Lact       | Laudocdale                           | · · · · · · · · · · · · · · · · · · ·       | FL 85 Zip                               | 220 U                  |  |  |
| 11. Pursuant t   | to the provisions of Sections 607.0502  | and 607.1508. Florida Statutes.      | the abov                  | Le-named      | corpora    | ation submits this star              | <u>*</u>                                    |   | its registered         |  |  |
| office or re   | egistered agent, or both, in the State of<br>m familiar with, and accept the obligati | Florida, Such change was aut         | horized by                | y the corp    | poration   | 's board of directors.               | I hereby accept the                         | appointment as                          | registered             |  |  |
|  | 6 6 3   | E. N                                 | Berzo                     |               |            | esident                              | 7/21/0                                      | lte                                     |                        |  |  |
| SIGNATURE  | Signature, typed or printed name of rugistried ligent                                 | and title if applicable (NOTE: F     | Registered Ag             | ent signature | required v | vhen reinstating)                    | <del>-2/2</del> 1/2                         | (1)<br>(1)                              |                        |  |  |
| 12.  | OFFICERS AND  |                                      | 13.                       |               |            |                                      | IGES TO OFFICERS                            |   | RS IN 12               |  |  |
| THILE  | PVST  | DELETE                               | 1.1 TOTLE                 |               | PV         | 51                                   |   | ✓ Change                                | Addition               |  |  |
| NAME   | BERZOK, ERIC A  |                                      | 1.2 NAME                  |               | €′         | 16 A Beight                          |   |   |                        |  |  |
| STREET ADDRESS   | 19366 E COUNTRY CLUB DR   |                                      | 1.3 STREET                | ADDRESS       | ן גַּי     |                                      |   |   | Į;                     |  |  |
| CITY-ST-ZIP  | AVENTURA FL   |                                      | 1.4 C(TY - S              | ST - ZIP      | F          | t. Lauderdale                        | FL 33304                                    |   |                        |  |  |
| TITLE  | D   | ☐ DELETE                             | 2.1 TITLE                 |               | P.         | A B                                  | •   | Change                                  | Addition               |  |  |
| NAME   | BERZOK, ERIC A  | ·                                    | 2.2 NAME                  |               |            | c A. Berzok                          |   |   |                        |  |  |
| STREET ADDRESS   | 19366 E COUNTRY CLUB DRIV   | E                                    | 2.3 STREET                | ADDRESS       | 3,77       | ONEIST ST                            | JE 102                                      |   |                        |  |  |
| CITY-ST-ZIP  | AVENTURA FL   | Drugge Control                       | 2. 4 CITY                 | ST - ZIP      | - 54       | Lauderdale                           | , FL 33301                                  | 4                                       |                        |  |  |
| TITLE  |   | ☐ DELETE                             | 3.1 TITLE                 | 1             | !          |                                      | •   | Change                                  | ☐ Addition             |  |  |
| NAME   |   |                                      | 3.2 NAME                  |               |            |                                      |   |   |                        |  |  |
| STREE1 ADDRESS   |   |                                      | 3.3 STREET                | - 1           |            |                                      |   |   |                        |  |  |
| CITY - ST - ZIP  |   | DELETE                               | 3.4. CITY -               | ST - ZIP      | ļ          |                                      |   | Chiro                                   | Addition               |  |  |
| TITLE  |   | ☐ DELETE                             | 4.1 TiTLE                 | - 1           |            |                                      |   | L. Change                               | Addition               |  |  |
| NAME<br>ATDEET ADDEESS   |   | 1                                    | 4. 2 NAME                 |               |            |                                      |   |   |                        |  |  |
| STREET ADDRESS   |   | !                                    | 4 3 STRFET                |               |            |                                      |   |   |                        |  |  |
| CITY-ST-ZIP  | <del></del>   | DELETE                               | 4.4 CITY - S<br>5.1 TITLE | ST - ZIP      |            | <del>~</del>                         | · · · · · · · · · · · · · · · · · · ·       | Change                                  | Addition               |  |  |
| TITLE  |   |                                      |                           | •             |            |                                      |   | LI Change                               | C MOUNDI               |  |  |
| NAME<br>STREET ADDRESS   |   |                                      | 5.2 NAME                  | ADDOCES       |            |                                      |   |   |                        |  |  |
| STREET ADDRESS   |   |                                      | 5.3 STREET                |               |            |                                      |   |   |                        |  |  |
| CITY-ST-ZIP<br>TITLE   |   | DELETE                               | 5.4 CITY - S<br>6.1 TITLE | it-ZIP        |            |                                      |   | Change                                  | Addition               |  |  |
|  |   | PT DELETE                            |                           | ĺ             |            |                                      |   | шл спалде                               | ☐ WOULDED              |  |  |
| NAME   |   |                                      | 6.2 NAME                  |               |            |                                      |   |   | J                      |  |  |
| STREET ADDRESS   |   |                                      | 6.3 STREET                |               |            |                                      |   |   |                        |  |  |
| CITY-ST-ZIP  |   |                                      | 6.4 CITY - 9              | T-ZIP         | L          |                                      |   |   |                        |  |  |

14. Thereby 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.