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

P95000000206 (9) DOCUMENT # 1. Corporation Name

ACC-Q-DATA, INC.

| Principal | Place | o | Business |
|-----------|-------|---|----------|
|-----------|-------|---|----------|

Mailing Address

40CC W DALMETTO DADY DO

FILED Apr 29 1997 8:00am Secretary of State



| BOCA RATON FL 33486 | | BOCA RATON FL 33486-3303 | | | | | | |
|-------------------------------|--|---|---------------------------------------|------------------|---|----------------|-------------------|-----------------------|
| | | | | | 3. Date Incorporated or Qualified | 3a. Date | of Last R | eport |
| | | | | | 01/03/1995 | | /1996 | |
| A) | lace of Business | 20. Mailing Address | | | 4. FEI Number | | Ap | plied For |
| 21 YO O | North Foderal Hydrun | Jee 400 N F | ederal H | MY | 65-0543482 | | | ot Applicable |
| Suite, Apt. 22 51 / | He_470 | Suite, Apt. # etc. | 470 | 1 | 5. Certificate of Status Desired | | \$8.75 A | Additional equired |
| City State | en Ration | 28 State PO | HON | | Election Campaign Financing Trust Fund Contribution | | \$5.00 Added t | |
| 24 33 | 138 25 Country | | Country 30 | | | Yes 🔲 | No | . 199.032, |
| | 9, Name and Address of Current | Registered Agent | | | 10, Name and Address of New Re | alstered Ag | ent | |
| | E, BARBARA | | 81 Nar | ne | | | | i |
| | 5 W PALMETTO PARK RD, 165 | | 82 Stre | et Addre | ss (P.O. Box Number is Not Acceptab | ie) | | |
| BOC | CA RATON FL 33486 | | 83 | | | | | |
| | | | 63 | | | | | |
| | | | 84 City | | | FLI | 85 Zip (| |
| 11. Pursuant I | to the provisions of Sections 607.0502 | and 607.1508, Florida Statutes | s, the above-nam | ed corpo | pration submits this statement for the p | urpose of ch | anging it | s registered |
| agent La | egistered agent, or both, in the State of m familiar with, and accept the obligati | ons of, Section 607.0505, Flori | ida Statutes. | orporatio | on's board or directors. Thereby accept | _ | | registered |
| SIGNATURE | BARBARA LOK | e Paes | Past | and | Table Pres | 1-7-9 | 7 | |
| 12. | Signature, typical or printed name of registered agen OFFICERS AND | | Registered opent signs | ture required | ADDITIONS/CHANGES TO OFFIC | DATE | brozor | 30 101 40 |
| TOLE | PSD | DELETE | 1.1 TITLE | Τ | ADDITIONS/CHANGES TO OFFIC | | Change | Addition |
| NAME | LAKE, BARBARA | | 1.2 NAME | | | 12. | , ondingo | |
| STREET ADDRESS | 1355 W PALMETTO PARK RD, 1 | 165 | 1.3 STREET ADDRES | a ac | 20 North Tederal | 11. 4 | at: | |
| CITY - S1 - ZIP | BOCA RATON FL | . • • | 1.4 CITY - ST - ZIP | " T | my Bolon Ela | MIGH | NAY. | 470 |
| TITLE | VPD | DELETE | 2.1 TITLE | | CA THIS | 242 PA | Change | Addition |
| NAME | LAKE, LISA | | 22 NAME | | | | | . — |
| STREET ADDRESS | 1355 W PALMETTO PARK RD, 1 | 165 | 2 3 STREET ADDRES | s Q | 00 North Feder | بالمامد | …姓. | 470 |
| CITY -ST - 71P | BOCA RATON FL | | 2 4 CITY-ST-ZIP | | 300 A PALATET | 234 | 2 <u>4</u> | 1 10 |
| 1/1LE | | ☐ DEŁETE | 31 TITLE | | | | Change | Addition |
| NAME | | | 3.2 NAME | | | | | |
| STREET ADDRESS | | | 3.3 STREET ADDRES | s | | | | |
| CHY-ST-7/P | | | 3.4. CITY-ST-ZIP | | | | | |
| TITLE | | ☐ DELETE | 4.1 TITLE | | | | Change | Addition |
| NAME | | | 4. 2 NAME | | • | | | |
| STREET ADDRESS | | | 4.3 STREET ADDRES | is | | | | |
| CITY-ST-ZIF | | | 4.4 CITY - ST - ZIP | | : | | · | |
| TITLE | | DELETE | 5.1 TITLE | | | | Change | ☐ Addition |
| NAME | | | 5.2 NAME | | | | | |
| STREET ADDRESS | | | 5.3 STREET ADDRES | is | | | | |
| CITY-ST-ZIF | | The ere | 5.4 CITY - ST - ZIP | | | | l nu | |
| TIRE. | | DELETE | 6.1 TITLE | | | L | j Change | Addition |
| NAME Street & ADSPESSOR | | | 6.2 NAME | | | | | |
| STREET ADDRESS | | | 6.3 STREET ADDRES | × | | | | |
| City-S1-ZiP | by certify that the information supplied v | with this filling does not availe. | 6.4 CHY-ST-ZIP | n stated t | n Section 110 07/21/0 Florido Citation | 16,000 | one: S s.b. = 3 | 4la a |
| intormation Lamian of | by dermy that the information supplied friedicated on this annual report or sup fricer or director of the corporation or th n Block 12 or Block 12 if changed, or o | oplemental annual report is tru ne receiver or trustee empower | e and accurate a red to execute th | ind that n | ny signature shall have the same legal | effect as if i | made und | der Aath: that |