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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

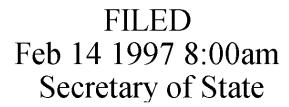
DOCUMENT # P9500002197 (8)

DATA SYSTEMS OF AMERICA, INC.

Principal Place of Business

Mailing Address

37 WAX MYRTLE COURT HILTON HEAD ISLAND SC 29926 37 WAX MYRTLE COURT HILTON HEAD ISLAND SC 29926-1051





					3. Date Incorporated or Qualified	3a. Date of Last Re	port								
			• • • • • • • • • • • • • • • • • • • •		01/10/1995	12/10/1996									
2. Principa' P	pat Place of Business 2a, Mailing Address				4. FEI Number		plied For								
	200 PROFESSIONAL BLDg. 26 SAME				59-3290622		t Applicable								
Suite, Apt. #, etc.  Suite, Apt. #, etc.  22 # /7 27					5. Certificate of Status Desired	\$8.75 A									
City & Stale	City & State City & State				6. Election Campaign Financing	\$5.00	May Be								
	HILTON HEAD ISLAND SC 28				Trust Fund Contribution Added to Fees										
Zip 1 a	9 9 2 8 Country Zip Coi				8. This corporation has liability for intangible tax under s. 199.032,										
[24]					Florida Statutes Yes No										
9, Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent										
6 PALM ROW ST. AUGUSTINE FL FL320-84				81 Name  82 Street Address (P.O. Box Number is Not Acceptable)  83											
														** .	
								ı			84	City		FL 85 Zip (	Code
44 Purcuant	to the provisions of Sections 607 0500	and E07 1500 Florida Statu	ton the chaus												
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 tide if applicable (NOTE: Registered Agent signature required when reinstating) OATE															
12,	OFFICERS AND		13.	nt eignature	ADDITIONS/CHANGES TO OFFIC	COC AND DIDECTOR	C INI 12								
TITLE	♥ V.P.				MARINO CARMEN		Addition								
NAME	MARINO, CARMEN	<b>—</b>	1.2 NAME		27 WAY MUANTE	e o v de la comme									
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NAME	MARINO, NEMAGARD		2.2 NAME		HARLAN BATCHELD, 21 Med BURY ROAD	FR									
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ŢITLE	P.	DELETE	3.1 TITLE	·		Change	Addition								
NAME	PHARLAN BATCH & 21 MEPBURY ROA NORTH ATTLEBORD	rlder	3.2 NAME												
STREET ADDRESS	21 MEDBURY ROA	1D	3.3 STREET	ADDRESS											
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			6.3 STREET	· I											
011Y-S1-ZP 14. I do herel	Legistry that the information supplied y	with this filing does not avail	6.4 CITY-SI		ated in Section 119.07(3)(i), Florida Statutes	Liurther certify that	iho								
informatic	on indicated on this annual second as as	planental appual report in	illy ion this over	inputor si	Abel in Socion 113.07(3)(1), Florida Statutes	. Linumer Certify man	II HB								

I. I do 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:** 

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