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 # P95000015650 (1)

CORPO	DRATE WORKFLOW SOLU	TIONS, INC.	` ,				
Principal Plac	ce of Business	Mailing Add	dress			T 188(188(IIM 18)6) BITH 86(1) BATH 88(1)	i dosos 1900) bisio gisos Bisks doli 1901
18815 SOUTH GOLDEN HAWK TRAIL 18815 SOUTH GOLDEN H JUPITER FL 33458 JUPITER FL 33458				HAWK TRAIL		DO NOT WRITE I	IN THIS SPACE
						3. Date Incorporated or Qualified	
l						02/24/1995	
·	Place of Business	2ø. Mailing	Address			4. FEI Number	Applied For
21		26				65-0565562	Not Applicable
Suite, Apt. #, etc. S 22 27			Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State City & State			tate			6. Election Campaign Financing	\$5.00 May Be
23 28						Trust Fund Contribution	Added to Fees
Zip	Country	Zip		Country	,	8. This corporation owes or has paid	
24			30		Personal Property Tax due June 30. Yes No		
ļ	9. Name and Address of Curr	ent Registered Ag	ent			10. Name and Address of New Reg	istered Agent
PATTERSON, J.E.				81	Name		i
18815 SOUTH GOLDEN HAWK TRAIL JUPITER FL 33458			82	Street A	ddress (P.O. Box Number is Not Acceptable	9)	
			83				
				84	City		FL 85 Zip Code
11 Pursuant	to the provisions of Sections 607.09	502 and 607, 1508	Florida Statute	es, the above	a-named (corporation submits this statement for the pu	
office or r agent. I a	registered agent, or both, in the Sta am familiar with, and accept the obt	le of Florida. Such gations of Section	change was a 607.0505, Flo	uthorized by orida Statutes	the corp	corporation submits this statement for the purporation's board of directors. I hereby accept	the appointment as registered
SIGNATURE	Signature typod or printed name of registered a	cont and title it applicable	(NOT	E. Danietorad And	ot signature	required when reinstating)	DATE
12.		ND DIRECTORS	(NOI)	13.	int signature i	ADDITIONS/CHANGES TO OFFICE	
TITLE	D		DELETE	1.1 TITLE		ADDITIONO (INTALO TO OTTIOL	Change Addition
NAME	PATTERSON, J.E.	•		1.2 NAME	1		
STREET ADDRESS	18815 SOUTH GOLDEN HA	WK TRAII		1.3 STREET	ADDRESS		
CITY-ST-ZIP	JUPITER FL 33458	THE THE		1.4 CITY - S			!
TITLE	VP		DELETE	2.1 TITLE	-		Change Addition
NAME	MEYER, RICHARD P.	_	_	2.2 NAME			
STREET ADDRESS	1081 CEDAR CREEK WAY			2.3 STREET	ADDRESS		1
CITY+ST-ZIP	DAVIE FL			2.4 CITY-5		. →.	V 4.1
TITLE	VP		DELETE	3.1 TITLE			Change Addition
NAME	FERNANDEZ, RICHARD F.	_		3.2 NAME	Ì		,
STREET ADDRESS	6000 SW 109 AVENUE			3.3 STREET	ADDRESS		
CITY-ST-ZIP	MIAMI FL			3.4. CITY - S	- 1		}
TITLE			DELETE	4.1 TITLE			Change Addition
NAME			-	4. 2 NAME	-		-
STREET ADDRESS				4.3 STREET	ADDRESS		
CITY-ST-ZIP				4.4 CITY - S			
TITLE			DELETE	5.1 TITLE			☐ Change ☐ Addition
NAME				5.2 NAME	1		
STREET ADDRESS				5.3 STREET	ADDRESS		
CITY-ST-ZIP				5.4 CITY-S			
TITLE		T T	DELETE	6.1 TITLE			Change Addition
NAME		_		6.2 NAME	- 1		
STREET ADDRESS				6.3 STREET	ADDRESS		

6.4 CITY-ST-ZIP

14. 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 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.

PICHARD P. MOLICE BLISTAR 561-401-1201

FILED

Mar 24 1998 8:00am

Secretary of State