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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Jan 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P95000025768 (9)

DATA SEARCH NETWORK, INC.

Information indicated with the corline an officer or directly of the corline Block 12 or block 13 if o

SIGNATURE:

Principal Place of Business Mailing Address 21218 ST. ANDREWS BLVD 21218 ST. ANDREWS BLVD #611 **BOCA RATON FL 33433 BOCA RATON FL 33433-2435** 3. Date Incorporated or Qualified 3a. Date of Last Report 03/29/1995 03/07/1996 2a. Mailing Address Principal Place of Busines FEI Number Applied For 7251 West Parmomole Ro 26 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 200 Fee Required City & State \$5.00 May Be 6. Election Campaign Financing 4020n П 28 Trust Fund Contribution Added to Fees Country Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes 🔲 No 29 30 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SKORUPSKI, JOANN 21218 ST. ANDREWS BLVD Street Address (P.O. Box Number is Not Acceptable) 83 **BOCA RATON FL 33433** Zip Code 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 1 am familiar with and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or proted name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS (96/6) 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 🔲 DELETE 1.1 TITLE Change Addition TITLE SKORUPSKI, JOANN 9757 Arbor OAKS LANE # 301 SKORUPSKI, JOANN NAME 1.2 NAME 6474 WOODBURY ROAD STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL** BOGA RATIN, FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE VP. 2 1 TITLE KAMMANIN GROSS, KENNETH GROSS, KENNETH 2.2 NAME 6474 WOODBURY ROAD 9757 Arbor Oaks Lane #301 STREET ADDRESS 2.3 STREET ADDRESS BOCA RATON, FL **BOCA RATON FL** 33428 2. 4 CITY - ST- ZIP CITY-ST-ZIF Change DELETE Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST- ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition THILE 5.1 TITLE NAME 5 2 NAME STREET AODRESS 5.3 STREET ADDRESS 5 4 CITY - ST - ZIP CITY - ST - ZIP DELETE Change Addition TITLE 61 TITLE 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY-ST-ZIP

14. 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 riport 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 directly of the comprision 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.

YPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR