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 # P95000037358 (5)

INFO/SIS TECHNOLOGIES CORPORATION

Apr 30 1998 8:00am Secretary of State

FILED

| Principal Plac | e of Business | Mailing Address | | 1 10416041 (18 (018) 411(1 001(1 001(1 001(1 001)) | til janna tilän älini lait 1881 |
|--|---|-------------------------------------|--------------------------------|--|---------------------------------|
| 3191 CORAL WAY. #603 MIAMI FL 28145 Should be MIAMI FL 28145 | | | | | |
| MIAMI FL 23145 > Should be MIAMI FL 38145 | | | | DO NOT WRITE IN THIS SPACE | |
| 100 Almeria Avenue, Surte 210 Coral Gables, FL 33134 | | | | 3. Date Incorporated or Qualified | |
| | Coral Ga | bles, FL 3313 | 34 | 05/11/1995 | |
| L ' | Tage of business | za, ivialling Address | | 4. FEI Number | Applied For |
| | Almeria Avenue | 26 100 Almeri | <u>a Avenue</u> | 65-0580624 | Not Applicable |
| Suite, Apt. | | Suite Apt. #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional |
| 22 Sul | te 210 | Suite 210 |) | | Fee Required |
| 23 COY | al Gables, FL | 28 Coral Gable | es, FL | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees |
| Zip | Country | Zip | Country | 8. This corporation owes or has paid the cu | |
| 24 331 | | 29 33134 3 | o usa | | Yes No |
| 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CDLIZ JEANNIE A 81 Name | | | | | |
| ONDE OCCUPANT MAY #000 | | | | Jeannie A. Cruz | |
| 3191 CORAL WAY, #603 | | | | dress (P.O. Box Number is Not Acceptable) | , |
| MIAMI FL 33145 | | | 83 | 100 Almeria Avenue | <u>-</u> |
| | | | | oute 210 | |
| | | | 84 City (| oral Gables Fl | 85 Zip Code |
| | | | | | |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutos, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of lorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of Section 607.0505, Florida Statutes. | | | | | |
| 1 | | | | | |
| SIGNATURE | Signature in our printed name of rugislered agent | ured when reinstating) DATE | | | |
| 12, | OFFICERS AND | DIRECTORS | 13. | ADDITIONS/CHANGES TO OFFICERS AN | |
| TITLE | P CO IT ITS NUTS A | L_I DELETE | 1.1 TITLE | seannie A. Cruz | Change |
| NAME | CRUZ, JENNIE A | | 1.2 NAME | learnic A Guz | Jr. 210 |
| STREET ADDRESS | 3191 CORAL WAY, #603 MIAMI FL 33145 | | 1.3 STREET ADDRESS | od Almeria Avenue, Su loral Gables, FL 831 | 34 |
| CITY-ST-ZIP TITLE | MIAMI FE 33143 | DELETE | 1.4 CITY-ST-ZIP | oral Gables, ru obl | Change Addition |
| NAME | 1 | | 2.2 NAME | | |
| STREET ADDRESS | | | 2.2 NAME 2.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 2. 4 CITY-ST-ZIP | | |
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| NAME | | . – | 3.2 NAME | | |
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| CITY-ST-ZIP | | | 3.4. CITY-ST-ZIP | | |
| TITLE | | DELETE | 4.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | İ | 4. 2 NAME | | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | |
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| TITLE | | ☐ DELETE | 51 TITLE | | Change Addition |
| NAME | | | 5.2 NAME | | |
| STREET ADDRESS | } | | 5.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | Decemen | 5.4 City-St-ZiP | | |
| TITLE | | ☐ DELETE | 6.1 TITLE | | Change Addition |
| NAME | | | 6.2 NAME | | 1 |
| STREET ADDRESS | | | 6 3 STREET ADDRESS | | |
| CITY-ST-ZIP | continuity that the information supplied with | this filing close not qualify for (| 6.4 CITY-ST-ZIP | Section 119.07(3)(i) Florida Statutes I further o | artifut that the information |

Indicated on this annual report or supplied with this inting 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 this 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 changes for or an attachment with an pooress.