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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthem

Secretary of State DIVISION OF CORPORATIONS

POCUMENT # P95000039728 (7) OAKOWSKY MANAGEMENT AND COMPUTER SYSTEMS, INC.

FILED May 19 1997 8:00am Secretary of State

Bringing Ding	o of Dustroop	Malling Address					
Principal Plac P Ó BÓX 1527 STUART FL 34		Mailing Address P O BOX 1527 STUART FL 34995-1	527				••••••
					3. Date incorporated or Qualified 05/19/1995	3a. Date of Last 09/23/1996	•
_ '	Place of Business	2a. Mailing Addres	S		4. FEI Number 65-05		Applied For
Suite, Apt.	# elc	26 Suite, Apt. #, el	ic		APPLIED FOR	60 74	Not Applicable Additional
22		27			5. Certificate of Status Desired	TX1	Required
City & State	le	City & State			6. Election Campaign Financing	\$5.0	O May Be
23		28			Trust Fund Contribution	☐ Adde	d to Fees
Zip 24	Country	Zip 29	Çounti	У	This corporation has liability for in Florida Statutes	ntangible tax under Yes X No	s. 199.032,
241	9. Name and Address of Cu		[30]		10. Name and Address of New Reg		
OWI	KOWSKY, EDWARD	Spelled was	Ja 1, B	Name _	DWARD S. OAK	برجا ودرر	
₂ 843	THORNHILL		- 8	2 Street Add	ress (P.O. Box Number is Not Acceptable	1002K1	
* PT 8	ST LUÇIÉ FL 33480		l L	116	VILLAS ST.		
	('		8	3			
			8	4 City CT	VART	FL 85 3	p Code 499 5
11. Pursuant	to the provisions of Sections 607.	0502 and 607 1508. Florida	Statutes the abo	ve-named corr	poration submits this statement for the pu		
office or r	registered agent, or both, in the Sam familiar with, and accept the o	tate of Florida. Such change	was authorized b	by the corporat	lion's board of directors. I hereby accep	t the appointment	as registered
			oo, i ionoa biatat	20.		-20 -99	7
	Signature, typed or printed name of registere	· · · · · · · · · · · · · · · · · · ·	(NO1E: Registered A	gent signature requi	red when reinstating)	DATE	
12.	OFFICERS	AND DIRECTORS	13. TE 1.1 TITLE		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTO	
NAME	OAKOWSKY, EDWARD S		1.2 NAM			— Criany	e Addition
STREET ADORESS	116 VILLAS STREET			ET ADDRESS			
CITY-ST-ZIP	STUART FL 34995		6 (.P.		
TITLE		DELE			harlene Oakowsky	Chang	e 🔀 Addition
NAME			2.2 NAM		•		
STREET ADDRESS	ļ		23 STRE		64 E 14th St		
CITY-\$T-ZIP		Florit	2. 4 City		vart, F1 34996	Chana	
NAME		L_ DELE	JE B.1 TITLE			☐ Chang	e L Addition
STREET ADDRESS	1		I ("	E1 ADDRESS			
CITY-ST-ZIP			3 4. CITY				
TITLE		DELE				Chang	e Addition
NAME			4. 2 NAM	E			
STREET ADDRESS			4.3 STRE	ET ADDRESS			
CITY-ST-ZIP		T SEL	4.4 CHY				
TITLE	·	☐ DELE		ļ		Chang	e
NAME STREET ADDRESS			5.2 NAMI				
CITY-ST-ZIP	,		5.3 STRE 5.4 CITY	ET ADDRESS			
TITLE		DELE				☐ Chang	e Addition
NAME	[-	6.2 NAM	ĺ			
STREET ADDRESS	1		•	ET ADDRESS			
CITY-ST-ZIP	}		[6.4 CITY	J			
	J_ 				ct in Section 119.07(3)(i), Florida Statutes t my signature shall have the same legal		

SIGNATURE: