Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90032 024 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000065287

1. Corporation Name

CEO SYSTEMS, INC.

Principal Place	e of Business	Mailing Address				1			
202 LAKE MIRIAM DR 1528 DEL CREST PLACE									
E-3 LAKELAND FL 33903						DO NOT	WRITE IN TH	IIS SPACE	
LAKELAND FL 33813						3. Date Incorporated or Qua	<u> </u>		
US :						08/23/1995	uneu	,	
Principal Place of Business 2a. Mailing Address						4. FEI Number			Applied For
26			<u></u>			59-3331564			Not Applicable
Suite, Apt.	Suite, Apt. #, etc.	ot. #, etc.			5. Certifcate of Status Desir	ed 🗆	~	5 Additional	
22		27						Required	
City & Stat	e	- City & State	- City & State			6. Election Campaign Finan	cing 🗀 🚁		May Be
23		28				Trust Fund Contribution			ed to Fees
Zip	Country	Zip	Cou	ntry		8. This corporation owes the	e current year		
24	25		30			Personal Property Tax.		Yes	No
	9. Name and Address of Curren	t Registered Agent		241		10. Name and Address of	iew Registere	ea Agent	
OTO	OOLE CHRISTOPHER			81	Name				
O'TOOLE, CHRISTOPHER 1528 DEL CREST PLACE				82	Street Ad	ldress (P.O. Box Number is Not Ac	cceptable)		
	ELAND FL 33803			83					
								11 -	
	•			84	City	•	· F		ip Code
office or r	to the provisions of Sections 607.0507 registered agent, or both, in the State im familiar with, and accept the obligat	nt Florida. Such change was a	utnonzec	ו סע נו	ne condura	orporation submits this statement for ation's board of directors. I hereby	or the purpose accept the ap	of changing pointment as	its registered registered
SIGNATURE	·	A Side Management (NOTE	Pasistana	Agent	eignatura PAGI	uired when reinstating)	DATE		
12.	Signature, typed or printed name of registered agen	D DIRECTORS	13.	rigent	argentino roqu	ADDITIONS/CHANGES T		AND DIREC	TORS IN 12
TITLE	D	DELETE	1,1 71	ÎLE				Chan	
NAME	O'TOOLE, CHRISTOPHER E		12 N	ME	- 1				
	1528 DEL CREST PLACE				ADDRESS				
STREET ADDRESS	LAKELAND FL 33803								
CITY-ST-ZIP			_	1.4 CITY-ST-ZIP 2.1 TITLE				Chan	ge Addition
	_ Public		2.2 NAME		1				
NAME					ADDRESS				
STREET ADDRESS				MY-ST			,		
CITY-ST-ZIP TITLE	12 12 12		3.1 TI		*ZIF:			Chan	ge Addition
	,		3.2 N					•	
NAME					ADORESS :				
STREET ADDRESS				ITY-ST	Į				1
СЛY-ST-ZIP TITLE		☐ DELETE	4.1 TI		-211			Chan	ge Addition
NAME		. —	4. 2 N				_		
			- 1		ADDRESS .				
STREET ADDRESS				1Y-ST-				•	
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TI					☐ Chan	ge Addition
	Í		52 N			;		. –	
NAME	1	,	t		ADDRESS				-
STREET ADDRESS				TY-ST-					
CITY-ST-ZIP TITLE		□ DELETE	6.1 TI		+	,, ,	,	☐ Chan	ge Addition
NAME	1							_	1
			6.2 N	VME.	ì		•		:

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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP