Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90073 032 ***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 # DOCOCOCTION

1. Corporation	DATA SYSTEMS INC.	16/19				
Principal Place	of Business	Mailing Address		[Mini mbali dalih garah dirit idale ingin ibuni baba ind	dr.
7351 NW 7TH 9	,	2201 BRICKELL AVENUE #7	' 6			
G	•••	MIAMI FL 33129		DO NOT	MOJTE IN THE COLOE	
MIAMI FL 33126	i			3. Date Incorporated or Qua	WRITE IN THIS SPACE	_
				09/01/1995		
2. Principal Pl	ace of Business	2a. Mailing Address	Nth of	4. FEI Number	Applied For	_
21		26 /351 NW	7th ST	65-0612180	Not Applicable	е
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desire	ed \$8.75 Additional Fee Required	-
22 City 8 Ct-1		City & State		a Flatia Canada Finan	A	_
City & State	,	MIAMI	£1	Election Campaign Finan Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes the	4	_
24	25	→ → → → → → → → → → → → → → → → → → →	30 USA	Personal Property Tax.	∰res □No	
1	9. Name and Address of Current	1 		10. Name and Address of N	lew Registered Agent	
		. ,	81 Name			
	RENS, PEDRO	,	82 Street A	Address (P.O. Boy Mumber is Not Ad	cceptable)	_
2201	BRICKELL AVENUE #76		82 Street A	51 NW 77# 57	Martin Charles Str.	
MIAN	II FL 33129		83	166 发生的 256 多生	聖德 智斯 等高速度 排放性	4,
			84 City		85 -7th Code. /	-
	<u> </u>		led City /	nlami, fl	FL 33126	
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State on m familiar with, and accept the obligation	if Florida. Such change was au	thorized by the corpo	corporation submits this statement to ration's board of directors. I hereby		
CIGITATIONE	Signature, typed or printed name of registered agent		Registered Agent signature re		DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO	O OFFICERS AND DIRECTORS IN 12 Michange	ion
TITLE	P	☐ DELETE	1.1 TITLE		× -	
NAME	LLORENS, PEDRO		1.2 NAME	7351 NW 7TH	ST STEG	
STREET ADDRESS	2201 BRICKELL AVE #76		1.3 STREET ADDRESS	<u> </u>	3126	
CITY-ST-ZIP	MIAMI FL 33129		1.4 CITY-ST-ZIP	MIAMI +L 3		ion
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NAME		☐ DELETE	2.1 TITLE		Change	liUfi
	MOCAHN, VIRGIL	☐ DELE≀E	2.2 NAME	7351 NW 7th	×	liOfi
STREET ADDRESS	260 N.W. 107 AVE #219	☐ DELE1E	2.2 NAME 2.3 STREET ADDRESS	7351 NW 7th	ST : STE-6	uori
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CITY-ST-ZIP with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information ntal 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 ecoure of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in transmit with an address, with all other like empowered. 14. I hereby certify that the information supplier indicated on this annual report or suppliere officer or director of the corporation or the rubleck 12 or Block 13 if changed, or or an all

6.4 CITY-ST-ZIP

SIGNATURE

TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

269-9997