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 # P95000087880 (7)

FILED Feb 26 1998 8:00am Secretary of State

SYSTE	MS & PRODUCTS SERVICE	S, INC.			
Principal Place	e of Business	Mailing Address			16111 18281 1918) 1911 USA 1881
3575 BENNIN	GTON DRIVE	3575 BENNINGTON DRIVI	E		
BOX 82		BOX 92		DO NOT WORTH IN TO	NO 6040E
FORT MYERS FL 33919		FORT MYERS FL 33919		DO NOT WRITE IN TH	IIS SPACE
				3. Date Incorporated or Qualified	
2 Principal P	lace of Business	2a. Mailing Address •	2	11/13/1995 4. FEI Number	Applied For
21	idde of Bosinessi	26 45 75 UM	Wests.	65-0623196	Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.	no fine		\$8.75 Additional
22		27 218	V	5. Certificate of Status Desired	Fee Required
City & State	0	City & State	<i>/</i>	8. Election Campaign Financing	\$5.00 May Be
23		28 Fof MYERS,	H	Trust Fund Contribution	Added to Fees
Zip	Country	- ZID2Q1Q	Country	8. This corporation owes or has paid the	
24	25	29 35 1/7	30 USA	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Register	ed Agent
	CKSON, C M		81 Name	popula HADORIS	
3575 BENNINGTON DRIVE			82 Street Add		taiD
BOX 92				1) VIA VEYALE T	215
FO	RT MYERS FL 33918	_	63	•	
		\cap	84 City	11 11 12	85 Zin Coden
		//	1 1 A-A		L 27979
11. Pursuant office or	to the provisions of Sections 607.0F03 egistered agent or botty in the State	And 607.1508, Florida Statuti If Florida, Such change was a	es, the above-named corp authorized by the corpora	poration submits this statement for the purposition's board of directors. I hereby accept the	e of changing its registered appointment as registered
agent. Va	m tamiliar with, and account the oblig	ions of Section 607.0505, Flo	orida Statutes.	,	-/. 60
SIGNATURE	/all A	w		ired when reinstating) DAT	2/11/78
12.	Signature, typind or printed frame of registrifed ages OFFICERS ANE		Registered Agent signature requi	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	0/P/5	DELETE	1.1 TITLE	ADDITIONS/OF INVALENTE OF THE CITE OF	Change Addition
NAME	FRANCISCO, RONALD C		1,2 NAME		
STREET ADDRESS	3575 BENNINGTON DRIVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	FORT MYERS FL 33919		1.4 CITY-ST-ZIP		
TITLE		DELETE	21 TITLE		Change Addition
NAME			2 2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY+ST-ZIP		
TITLE		DELETE	3.1 T(TLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-2IP	 		3.4. CITY-ST-ZIP		· · ·
TITLE	······································	DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME	•	
STREET ADDRESS			4.3 STREET ADDRESS		*
CITY-ST-ZIP			44 CHTY-ST-ZIP	·····	
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-S1-ZIP			5.4 CITY-ST-ZIP		T-1-7,1
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	 		6.4 CITY-ST-ZIP		
 I hereby c indicated 	certify that the information supplied wit on this annual report or supplieniental	h this filing does not qualify for annual report is true and acc	or the exemption stated in urate and that my signatu	Section 119.07(3)(i), Florida Statutes. I further are shall have the same legal effect as if made	r certify that the information I under oath; that I am an

execute this report as required by Chapter 607, Florida Statutes; and that my name appears in