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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600006105 (6)

POWER IN DATA, INC.

Principal Place of Business

850 SW 82ND AVENUE NORTH LAUDERDALE FL 33068-3420 Mailing Address

950 SW 82ND AVENUE NORTH LAUDERDALE FL 33068-3420

FILED Mar 04 1997 8:00am Secretary of State



			3. Date Incorporated or Qualified 01/17/1996	3a. Date of Last Report
2. Principal Place of Business	2a, Mailing Address	3 4 .	4. FEI Number	Applied For
21 950 SW 82 AVE	26 958 SW 86	HVC.	65-0635751	Not Applicable
Sule, Apt. #, elc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
23 North LAUDERDALE, R	City & State 28 North LAVI	ERDACE FL	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
7171 Country 24 35068-3420 25 BROWARD	29 3306B-3420	Country 30 BLOWALD	8. This corporation has liability for in	intangible tax under s. 199.032, Yes \textbf{\textsize} No
Name and Address of Curren	t Registered Agent		10. Name and Address of New Re	gistered Agent
IRWIN, FRANCIS		81 Name	UN. FRANCIS	
950 SW-82ND AVENUE NORTH		82 Street Add	dress (P.O. Box Number is Not Acceptab	ole)
LAUDERDALE FL 33068-3420		950	SW BE AVE	
		83		
•		84 City	h LAUDERDALE	85 Zip Code
11. Pursuant to the provisions of Sections 607.050.	2 and CO7 1500 Florida Ptatute	/voe		FL 37058-370
office or registered agent, or both, in the State agent it am familiar with land accept the obliga	of Florida, Such change was a	athorized by the corpora	ation's board of directors. I hereby accep	of the appointment as registered
SIGNATURE Signature typing or printed transe of registered age	or and tite if applicable (NOTE	: Registered Agent signature requ	uired when re-nstating)	DATE
12. OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
TIPLE PSTD	☐ DELETE	1.1 TITLE		Change Addition
IRWIN, FRANCIS STREET ACCIDENS 950 SW 82ND AVENUE NORTH LAUDERDALE FL 33068-3420 COLUMN CO		1.2 NAME		
		1.3 STREET ADDRESS		
		1.4 CITY-ST-ZIP		Change Addition
TILL	DELETE	2.1 TITLE		T Pusuda T Voorgon
NAME		22 NAME	•	
STREET ADDRESSS		2.3 STREET ADDRESS		
CHY-ST-ZIP THE	DELETE	2. 4 CITY-ST-ZIP 3.1 TiTLE		Change Addition
NAME	Barried , to the control of	3.2 NAME		
STREET ADDERESS		3.3 STREET ADDRESS		
CITY - \$1 - ZiP		3.4 CITY-ST-ZIP		
TRUE	DELETE	4.1 TITLE		Change Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY (ST) 779		4.4 CITY-ST-ZIP		
TIFLE	DELETE	5 1 TITLE		Change Addition
NAME		52 NAME		
STREET ACIDALISS		5 3 STREET ADDRESS		
CHY-ST-Zir		5.4 CITY+SY-ZIP		
TITLE	☐ DELETE	61 TITLE		Change Addition
NAME		6.2 NAME		
STREET ADOMESS		6.3 STREET ADDRESS		
CITY: \$1, 20°		6.4 CITY - ST - ZIP		

14. I do 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 Brock 13 if changed, or on an attachment with an address.

SIGNATURE:

IGNATULE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/24/97 (954)724-8568