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May 06 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000007456 (2)

1. Corporation Name  
MAIERS SYSTEMS, INC.

Principal Place of Business

855 TAFT VINELAND RD. SUITE E  
ORLANDO FL 32824

Mailing Address

855 TAFT VINELAND RD. SUITE E  
ORLANDO FL 32824-8042

3. Date Incorporated or Qualified

01/24/1996

3a. Date of Last Report

2. Principal Place of Business

21 11310 Satellite Blvd.,

Suite, Apt. #, etc.

22

City & State

23 Orlando, FL

Zip

24 32837

Country

25 US

2a. Mailing Address

26 11310 Satellite Blvd.,

Suite, Apt. #, etc.

27

City & State

28 Orlando, FL

Zip

29 32837

Country

30 US

4. FEI Number

59-3358893

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

MAIERS, GERALD  
855 TAFT VINELAND RD, SUITE E  
ORLANDO FL 32824

10. Name and Address of New Registered Agent

81 Name

81 Maiera, Gerald

82 Street Address (P.O. Box Number is Not Acceptable)

82 11310 Satellite Blvd.

83

84 City  
Orlando

FL

85 Zip Code  
32837

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Gerald J. Maiera*

Gerald J. Maiera, Director

4-28-97

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

D  
NAME MAIERS, GERALD  
STREET ADDRESS 12088 BLACKHEATH CIRCLE  
CITY-ST-ZIP ORLANDO FL 32837

TITLE ☐ DELETE

D  
NAME MAIERS, CHUCK  
STREET ADDRESS 5901 TAVENDALE DR  
CITY-ST-ZIP ORLANDO FL 32809

TITLE ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

D  
NAME Charles Maiera  
STREET ADDRESS 12528 Britwell Ct.  
CITY-ST-ZIP Orlando FL 32837

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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 Block 13 if changed, or on an attachment with an address.

SIGNATURE *Gerald J. Maiera*

Gerald J. Maiera, Director

4-28-97

407-852-0697

CR2E034 (9/96)