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PROFIT CORPOBATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000014848 (1)

MANAGEMENT & TECHNICAL SOLUTIONS, INC.

Mailing Address Principal Place of Business 3003 SOUTH CONGRESS AVE. 3003 SOUTH CONGRESS AVE. SUITE 1E SUITE 1E LAKE WORTH FL 33461-2169 LAKE WORTH FL 33461 3. Date Incorporated or Qualified 3a. Date of Last Report 02/14/1996 4. FEI Numbe 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 21 26 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5,00 May Be 23 28 Trust Fund Contribution Added to Fees Country Country B. This corporation has liability for intangible tax under s. 199.032, Yes No Florida Statutes 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name ALLEN, ROBERT S JR. 3003 SOUTH CONGRESS AVE. 82 Street Address (P.O. Box Number is Not Acceptable) LAKE WORTH FL 33461 83 84 Zip Code 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS (96/6) 13. DELETE Change 1.1 TITLE Addition THE TACKETT, JAMES 1.2 NAME NAME 3003 SOUTH CONGRESS AVE. STREET ADDRESS 1.3 STREET ADDRESS LAKE WORTH FL 33461 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition 21 TITLE Change THE ALLEN, ROBERT S JR 22 NAME NAME 3003 SOUTH CONGRESS AVE. 2.3 STREET ADDRESS STREET ADDRESS LAKE WORTH FL 33461 2. 4 City-St-ZiP CITY - ST - ZIE DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS C-TY - ST - ZIP 3.4. CITY-ST-ZIP Addition DELETE Change THLE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - ZIP Change DELETE Addition TOTAL 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition 61 TITLE Title NAME 6.2 NAME

6.3 STREET ADDRESS

64 CITY-ST-ZIP

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 an antaloguent with an address.

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

SIGNATURE:

STREET ADDRESS

SIGNATURE ON THE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/10/01

(Su) 9140-10015

FILED

Feb 12 1997 8:00am

Secretary of State