## 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 #** P96000021957 (1)

Principal Place of Business	Mailing Address	
924 SW 149TH WAY SUNRISE FL 33326	924 SW 149TH WAY SUNRISE FL 33326	

## **FILED** Mar 10 1998 8:00am Secretary of State

1. Corporation	N SOFTWARE SYSTEMS, I	INC.	,			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Principal Plac	e of Rusiness	Mailing Address			10th/00th/15 (\$100 Bill)		
924 SW 149TH WAY 924 SW 149TH WAY SUNRISE FL 33326 SUNRISE FL 33326							
					DO NOT WRITE IN TI	HIS SPACE	
					3. Date Incorporated or Qualified 03/11/1996		
2. Principal P	lace of Business	2a. Mailing Address		<del> </del>	4. FEI Number	Applied For	
21		26			65-0659304	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				\$8.75 Additional	
22		27			5. Certificate of Status Desired	Fee Required	
City & State	e	City & State			6. Election Campaign Financing	<b>\$5.00</b> May Be	
23		28			Trust Fund Contribution	Added to Fees	
Zip	Country	Ζιρ	<u> </u>	ıntry	8. This corporation owes or has paid the		
24	25	29	30	1	Personal Property Tax due June 30.  10. Name and Address of New Registe	☐ Yes ☐ No	
	9. Name and Address of Curre	int Registered Agent		81 Name	10. Name and Address of New Registe	red Agent	
DAVENPORT, ERIC W							
	I SW 149TH WAY NRISE FL 33326			82 Street Ad	ddress (P.O. Box Number is Not Acceptable)		
301	NRISE FL 33326			83			
				84 City	1	EL 85 Zip Code	
11. Pursuant i	to the provisions of Sections 607.05	02 and 607,1508. Florida Stat	utes, the a	bove-named c			
office or r	egistered agont, or both, in the Stat	e of Florida Such change was	authorize	d by the corpo	orporation submits this statement for the purpor oration's board of directors. I hereby accept the	appointment as registered	
	m tamiliar with, and accept the oblig	gations of, Section 607.0505,	riorida Sta	iules.			
SIGNATURE	Signature, typed or printed name of registered ag	gent and title if applicable (N	OTE: Registere	d Agent signature re	equired when reinstating) DA	TE	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12	
TITLE	P	☐ DE1.ETE	1.1 T	TLE		Change Addition	
NAME	DAVENPORT, ERIC W		1.2 N	ame			
STREET ADDRESS	924 SW 149TH WAY		1.3 S	TREET ADDRESS			
CITY-ST-ZIP	SUNRISE FL		1.4 C	ITY-ST-ZIP			
TITLE	ST	☐ DEL.ETE	2.1 T	TLE		Change Addition	
NAME	DAVENPORT, EMILIE A		2.2 N	AME	·		
STREET ADDRESS	924 SW 149TH WAY		2.3 \$	TREET ADDRESS			
CITY-ST-ZIP	SUNRISE FL		2.40	ITY-ST-ZIP			
TITLE		☐ DELETE	3.1 Ti	TLE		Change L Addition	
NAME			3.2 N	AME			
STREET ADDRESS			3.3 S	TREET ADDRESS			
CITY-ST-ZIP				ITY-ST-ZIP			
TITLE		☐ DELE <b>TE</b>	4.1 T			L Change L Addition	
NAME			4.21				
STREET ADDRESS				reet address			
CITY-ST-ZIP		T DELETE		TY-ST-ZIP		Observa Addition	
TITLE		☐ DELETE	5.1 T			Change Addition	
NAME			5.2 N			İ	
STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP		DELETE		TY-ST-ZIP		Change Addition	
TITLE		□ Derete	6.1 Ti			L. Onango L. Audition	
NAME			6.2 N				
STREET ADDRESS			1	REET ADDRESS			
CITY-ST-ZIP			D.4 G	TY - ST - ZIP			

14. I 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 attackment with an address.

MMMOH 3, 1992

(954)474-2542