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 # P9600039003 (4)

PRIORITY ONE SYSTEMS, INC.

Principal Place of Business

Mailing Address

740 N.E. 1ST ST., #1 POMPANO BEACH FL 33060-6306 740 N.E. 1ST ST., #1 POMPANO BEACH FL 33060-6306

FILED Apr 25 1997 8:00am Secretary of State



					3. Date Incorporated or Qualified	3a. Date of Last	Report
. Delegand C	lane of Business	La Mailing Address			05/01/1996 4. FEL Number		A 15 1 = -
	lace of Business ST ST.	26 740 NE 13	[C., .	Ħ	65-0664114	}	Applied For
Sulte, Apt.		Suite, Apt. #, etc.	<u>١٠.</u>		65-0604114		Not Applicable
22 # 1 27 # (L & Corbicate of Status Desired 1.1		Additional Required	
23 Com	PANOBEACH, FL	28 POMPANO BE	ACH	, FC	6. Etection Campaign Financing Trust Fund Contribution	· ·	0 May Be d to Fees
Zip 24 3 300	Country	7φ 29 33060-6306 3	Country		This corporation has liability for Florida Statutes	intangible tax under Yes 📉 No	s. 199.032,
	9. Name and Address of Current I	Registered Agent		10. Name and Address of New Registered Agent			
HAMILTON, JANINE M				81 Name			
740 N.E. 1ST ST., #1 POMPANO BEACH FL 33060-6306			82	82 Street Address (P.O. Box Number is Not Acceptable)			
			Ĺ				
			83	83			
i.			84	City	——————————————————————————————————————	FL 85 Zi	p 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 arm familiar with, and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or profiled name or registered agent and the of applicable (NOTE-Registered Agent signature required when renspaning). DATE							
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTO	ORS IN 12
TITLE	PRESIDENIT	DELETE	1.1 TILLE			☐ Change	e 🔲 Addition
NAME	JAKILLIE M. HAMILTON		1.2 NAME				
STREET ADDRESS	740 NE 135 ST. #1			ADDRES\$			
CITY-ST-ZIP	POMPANO BEACH	FL 33060-6306	1.4 CHTY - S	S1- ZIP			
TITLE	POMPANO BEACH, FL 33060-6306		2.1 TITLE			Change	e 🔲 Addition
NAME	STEPHEN B. MUSSE THO NEIST ST. #1	ER	2.2 NAME				
STREET ADDRESS	THO NETST ST. FI		2.3 STREET	I ADDRESS			
CITY-ST-ZIP	POMPANO BEACH, AL		2. 4 CITY-	ST-ZIP			
TITLE		L DELETE	31 THILE	ţ		☐ Change	e L Addition
NAME			32 NAME	1			
STREET ADDRESS				ADDRESS			
CITY-ST-ZIP		DELETE	3 4. CHY-	ST - ZIP		Change	e
TITLE			4.1 TITLE	1		L_1 Change	; [_] Addition
NAME STREET ADDRESS			4, 2 NAME	LADDRESS	•		
CITY+ST-ZIP TITLE		DELETE	4.4 CITY - 5 5.1 TITLE	21-711		Change	e Addition
NAME			5.2 NAME	1			
STREET ADDRESS				LADORESS			
CITY-ST-ZIP			54 CHY-3				
TITLE		DELFTE	61 HILE	2.1.1.		Change	e 🔲 Addition
NAME			6.2 NAME				
STREET ADDRESS			1	I ADDRESS			
CITY-ST-ZIP			6.4 CITY-1				
14, I do heret	by certify that the information supplied of	with this filing does not qualify	for the exe	emption sta	ted in Section 119.07(3)(i), Florida Statule	es. I further certify th	at the
informatio I am an o	on indicated on this annual report or sur	oplemental annual report is true le receiver or trustee empower	e and acc ed to exco	urate and th	nat my signature shall have the same leg- port as required by Chapter 607, Florida (al effect as if made i	under oath: that