


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

FILED

May 01 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 # **P96000043571 (4)**

1. Corporation Name
ATS SMARTECH, INC.

Principal Place of Business 6363 N.W. 6TH WAY SUITE 210 FT. LAUDERDALE FL 33309	Mailing Address 6363 N.W. 6TH WAY SUITE 210 FT. LAUDERDALE FL 33309-6136
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3. Date Incorporated or Qualified 05/22/1996	3a. Date of Last Report
4. FEI Number 65-0670215	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24 25	29 30

9. Name and Address of Current Registered Agent DEAN, RICHARD 6363 N.W. 6TH WAY SUITE 210 FT. LAUDERDALE FL 33309	10. Name and Address of New Registered Agent
81 Name CAL REMY	82 Street Address (P.O. Box Number is Not Acceptable) 9550 SUNSET STRIP
83	84 City SUNRISE
	85 Zip Code FL 33322

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: *Cal Remy* **PRESIDENT (CAL REMY)** DATE: **4/24/97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input checked="" type="checkbox"/> DELETE	1.1 TITLE	O <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DEAN, RICHARD	1.2 NAME	Cal Remy
STREET ADDRESS	6363 N.W. 6TH WAY SUITE 210	1.3 STREET ADDRESS	9550 SUNSET STRIP
CITY - ST - ZIP	FT. LAUDERDALE FL 33309	1.4 CITY - ST - ZIP	SUNRISE FL 33322
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	O <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	ROBERT ALLEN
STREET ADDRESS		2.3 STREET ADDRESS	12201 PARK DRIVE
CITY - ST - ZIP		2.4 CITY - ST - ZIP	COOPER CITY, FL 33026
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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: *Cal Remy* **(CAL REMY)** DATE: **4/24/97** DAYTIME PHONE: **954-472-9994**

CR2E034 (9/96)