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 # P96000052914 (4)

LIGHTING AGENTS SOFTWARE SOLUTIONS, INC.

Principal Place of Business

Mailing Address

14326 VILLAGE VIEW DRIVE

14328 VILLAGE VIEW DRIVE TAMPA FL 33624-6901

FILED Jun 16 1997 8:00am Secretary of State



TAMPA FL 336	24	TAMPA FL 33624-6901			
	-			3. Date Incorporated or Qualified 06/19/1996	3a. Date of Last Report
· ·	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
	13 Berea Orive	26 15613 Be	icea Dlive	59-3394882	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & Stat	le .	City & State		6. Election Campaign Financing	\$5.00 May Be
53 DQ	essa, FL	28 Odessa,	F-L	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for in	ntangible tax under s. 199.032
24 <u>33</u> 5	56 25 USA 9. Name and Address of Curren	29 <u>3355</u> し 3	o USA		Yes No
LIIA	IGET, BARBARA	r vaðisteren viðerir	81 Name	10. Name and Address of New Re	Jistered Agent
			I warne	BARBARA HUNGET	
14328 VILLAGE VIEW DRIVE TAMPA FL 33624			82 Street A	Address (P.O. Box Number is No. Acceptab	le)
IPSM	FA FL 33024		83	5613 Berea Drive	
	•		84 City	lace -	FL 85 Zip Code 33556
11. Pursuant	to the provisions of Sections 607 0502	2 and 607 1508 Florida Statutes	the above-named	Sessa	rpose of changing its registered
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 vith, and accept the obligations of, Section 607.0505, Florida Statutes.					
	in familia Win, the accept the obliga		da Statutes.	47.17	67
SIGNATURE	Signature, typed or printed name (Legistered ager	B. HWge T nt and tille II applicable. (NOTE F	tegistered Agent signature r	equired when reinstating)	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TOLE	TICE VIESICENT	Change Maddition
NAME	HUNGET, BARBARA		1.2 NAME	Robert B. English,	Jr.
STREET ADDRESS	14328 VILLAGE VIEW DRIVE		1.3 STREET ADDRESS	15613 Berea Dr.	
CITY-ST-ZIP	TAMPA FL 33624		1.4 CITY+ST-ZIP	Obessa, FL 3355L	>
TITLE		DELETE	2.1 TITLE	,	Change Addition
NAME			2.2 NAME		
STREET ADDRESS	-		2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CHTY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		☐ DELETE	4.1 TITLE		L. Change L. Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CHY-ST-ZIP		Change Labor
NAME		F" DETEIL	5.1 TITLE		☐ Change ☐ Addition
			5.2 NAME		
STREET ADDRESS			5.3 STREFT ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
NAME		C Deteir	6.2 NAME		Change L Addition
STREET ADDRESS					
CITY-ST-ZIP			6.3 STREET ADDRESS		
14. Loo hereb	ov certify that the information supplied	with this filing does not qualify t	or the exemption sta	ated in Section 119.07(3)(i), Florida Statutes	I further certify that the
I am an of	n indicated on this annual report or su	ipplemental annual report is true The receiver or trustee empowers	and accurate and tood to execute this re	hat my signature shall have the same legal port as required by Chapter 607, Florida St.	effect as if made under eath, that I