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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 28 1998 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000084437 (8)

CUSTOM SOLUTIONS INTERNATIONAL, INC.

2460 MINTON W MELBOURN U\$		902 CLINT MOORE ROAL BOCA RATON FL 33487	d. Suite .	208		DO NOT WRITE IN THIS  3. Date Incorporated or Qualified  10/11/1996	SPACE	
2. Principal Pi	ace of Business	2a. Mailing Address			,	4. FEI Number		Applied For
21		26				65-0702876		Not Applicable
Sulte, Apt.	#, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.7	5 Additional
22		27				6. Certificate of Status Desired	Fee	Required
City & State	9	City & State				6. Election Campaign Financing		<b>)0</b> May Be
23		28				Trust Fund Contribution		ed to Fees
Zip	Country	Zip		intry		8. This corporation owes or has paid the cu		_ ~
24	25 9. Name and Address of Current	29 Registered Agent	30	r		Personal Property Tax due June 30.  10. Name and Address of New Registered	Yes	∐ No
DAI		Tiogratorou Agont		81	Name		rgont	
BAUGH, THOMAS 902 CLINT MOORE RD								· <del></del>
#20			82 Street Addre		Street	Address (P.O. Box Number is Not Acceptable)		
	DA RATON FL 33487			83			-	
000	OA 1811ON FE 3340!							
				84	City	FL	_ <b> 85</b>   2	lip Code
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE    Signature, typed or probled name of registered agent and to of applicable. (NOTE: Registered Agent signature required when reinstating)    DATE								
TITLE	D	DELETE	1.1 10	Tí F		ADDITIONS/CHANGES TO OTTICENS AND	Chang	
NAME	BAUGH, WILLIAM		1.2 N/				LL CHAIN	,
STREET ADDRESS	902 CLINT MOORE RD., #208				ADDRESS			
CITY-ST-ZIP	BOCA RATON FL		1.4 CI					
TITLE	T	DELETE	2.1 TI				Chang	e Addition
NAME	BAUGH, THOMAS		2.2 NA	ME				
STREET ADDRESS	902 CLINT MOORE RD #208		2.3 STREET ADDRESS		ADDRESS			
CITY-ST-ZIP	<b>BOCA RATON FL</b>		2. 4 C(TY - ST - Z(P		1 - 2(P			
TITLE	S	DELETE	3 1 TI	31 TITLE			Chang	ge Addition
NAME	PADDEN, ROBERT		3.2 NA	3.2 NAME				
STREET ADDRESS	2460 MINTON ST		3.3 ST	REET	ADDRESS			
CITY-ST-ZIP	_W MELBOURNE FL		3 4. C		T - 2(P			
TITLE		DELETE	4 1 TC				☐ Chang	ge L Addition
NAME			4.2 N			<u>}</u>		
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP TITLE		☐ DEL <b>E</b> TE	4.4 CF 5.1 TF		- ZIP		Chang	ie Addition
NAME			5.2 NA				C CHENT	In The Vertical
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP			5.4 CI					
TITLE		☐ DELETE	6.1 TIT				Chang	e Addition
NAME		<del>-</del>	6.2 NA					
STREET ADDRESS			1		ADDRESS			
CITY-ST-ZIP			6.4 CI					
14. I hereby c indicated of officer or o	on this annual report or supplemental	annual report is true <b>and</b> acciver or trustee empowered to	or the exe	mpt d tha	ion state t my sig	ed in Section 119.07(3)(i), Florida Statutes. I further ca gnature shall have the same legal effect as if made un s required by Chapter 607, Florida Statutes; and that i	ider oath;	that I am an