SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra - Mortinm

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600084506 (0)

DAVIS CYBER TECHNOLOGIES INCORPORATED

FILED Sep 24 1997 8:00am Secretary of State



Principal Place of Business	Mailing Ad	dress		- I TOO STORM ALLA PORTO BEING BOUND BOTH BOUND LOVEL BUING
410-F GOVERNMENT AVENUE		ERNMENT AVENUE		
VALPARAISO FL 32580 VALPARAISO FL 32580				DO NOT WRITE IN THIS ODNOR
				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report
				10/14/1996
2. Principal Place of Business	2a. Mailing	Address		4. FEI Number Applied For
21	26			59-340 500 2 Not Applicable
Suite, Apt. #, etc.	Suite, A	pt. #, etc.		5. Certificate of Status Desired S8.75 Additional
22	27			Fee Required
City & State	City & S	Slate		6. Election Campaign Financing \$5.00 May Be
Zip Country	28 Zip	Cor	intry	Trust Fund Contribution Added to Fees
24 25	29	30	инсту	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
9. Name and Address of Curr				10. Name and Address of New Registered Agent
CORPORATION SERVICE COMPA	NY		81 Name	
1201 HAYS STREET			82 Street	EAN THOM(SON) t Address (P.O. Box Number is Not Acceptable)
TALLAHASSEE FL 32301-2525				4456 HUNTINGTON CIR
			83	
			84 City	Adda 85 Zip Code
			' /	NICEUILLE FI 132570
 Pursuant to the provisions of Sections 607.05 office or registered agent, or both, in the Sta 	502 and 607.1508, te of Florida. Such	Florida Statutes, the a change was authorize	bove-named d by the con	d corporation submits this statement for the purbose of changing its registered rporation's board of directors. I hereby accept the appointment as registered
agent. I am familiar with, and account the obli	igations of, Section	607.0505, Florida Sta	utes.	
SIGNATURE Signature, typed or printer are of registered a	igent and title if applicable	romson	4.4	ro required when reinstaing) DATE
	ND DIRECTORS	13.	a Agent signature	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE D		DELETE 1.11	TLE	PRESIDENT _ S Y Change Addition
NAME DAVIS, JOHN THADDEUS		1.2 N	AME	OJOHNT. Days
STREET ADDRESS 3 CEDAR RIDGE WAY		1.3 S	REET ADDRESS	4456 Huntington CR
CITY-ST-ZIP NICEVILLE FL 32578		1.4 0	TY-ST-ZIP	Niceri le FL 32578
TITLE D		DELETE 2.1 11	!LE	VICE PRESIDENT Change Addition
NAME DAVIS, CHERI ANN STREET ANDRESS 3 CEDAR RIDGE WAY		2.2 N	AME	DU + 10 Thomas
AHOENDILE EL 20570		2.3 S	REET ADDRESS	Kobert Wy Lhomson
0111-01-61			ITY - S1 - ZIP	Wheel He 1 33578
TITLE NAME	ι	3.1 TI 3.2 No.		DIRECTOR - SECRETARY /TR . Change M Addition
STREET ADDRESS			ree1 address	GENEULEVIE M. Thomson 4454 HUNTINGTON CIR
CITY-ST-ZIP			KEET ADDRESS ITY-ST-ZIP	NICEVILLE FL 3257B
TITLE		DELETE 4.1 TI		Change Addition
NAME	•	4.2 N		
STREET ADDRESS		43 \$1	REET ADDRESS	
CITY-ST-ZIP			1Y-S1-ZIP	
TITLE		DELETÉ 51 TI	LE	☐ Change ☐ Addition
NAME		5.2 NA	ME	
STREET ADDRESS		5.3 \$1	ref1 address	
CITY-ST-ZIP			TY-S1-ZIP	
TITLE	L	DELETE 6.1 TI		☐ Change ☐ Addition
NAME		6.2 N/		
STREET ADDRESS		6.3 ST	REET ADDRESS	
CITY-ST-ZIP			IY-S1-ZIP	1

I have been been seen and the intermediate symptous with this immig does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this ampital report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of thy corporation or the receiver or truttee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 3 if chapter or program and that my name and the second of the program of the