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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700003801 (2)

INDUSTRIAL CONTROL SYSTEMS, INC.

FILED Apr 28 1998 8:00am Secretary of State

(813) 345-5308

Principal Place	e of Business	Mailing Address				1 1 10001000 110 1016 1001 0014 0014 001	90114 40101 . 11101 10114 01	AIDT AIDT FEBT
1243 TALLEVAST ROAD SARASOTA FL 34243		1243 TALLEVAST ROAD SARASOTA FL 34243			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified 01/14/1997		
Principal Place of Business 2a. Mailing Address				·		4, FEI Number	A	Applied For
21 672	2 - 28 IN AUE N	126 6772 - 28	12 A	UE. A	ノ、	65-0720094	N N	vot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			_	5. Certificate of Status Desired		Additional Required
City & State	ETERCIAL TI	City & State	To College Management and the second			6. Election Campaign Financing	<u> </u>	May Be
23 7 - /2 Zip	Country Country	28 17 - /E/EX	5 BUL	intry	7			to Fees
21 337		29 337/0		LA		 This corporation owes or has paid Personal Property Tax due June 30 		ntangible No
24 12 2 .	g. Name and Address of Curren		301 0	<u> </u>		10. Name and Address of New Regis		
AME		81 Name						
		82 Street	Addre	ss (P.O. Box Number is Not Acceptable				
343 ALMERIA AVENUE CORAL GABLES FL 33134				02 SIFER	Audie	ss (F.O. Box Mulliper is Not Acceptable	,	
				83				
				84 City			as Zin	Code
				City			FL 85 Zip	Cooe
11. Pursuant t	to the provisions of Sections 607.0502	and 607 1508, Florida Statu	ites, the a	pove-named	corpo	pration submits this statement for the purents board of directors. I hereby accept	pose of changing	its registered
	egistered agent, or both, in the state m f ami liar with, and accept the obliga				poratio	in's board of directors, a hereby accept	пе арропппен а	s registered
SIGNATURE								
	Signature, typed or printed name of registernal ages			d Agent signature	e required	d when reinstaling)	DATE	
12.	OFFICERS AND	DELETE	13. 1.1 II		1	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTO Change	
TITLE	PSTD						Sectional	Auginon
NAME Street adoress	JACKMAN, GRAHAM 1243 TALLEVAST ROAD		1.2 N	REET ADDRESS	1 /	777 - 28TH AL	VE N.	
	SARASOTA FL 34243		. 1	TY-ST-ZIP	7	772-2854 AU	FL 33	2/2
CITY-ST-ZIP TITLE	GREGOTA I E 04240	DELETE	2.1 Ti		1	/E/EESPURO	☐ Change	Addition
NAME			2.2 N		1		*	
STREET ADDRESS				REET ADDRESS				
CITY-ST-ZIP				ITY-ST-ŽIP	1			
TITLE		DELETE	3.1 T(TLE	1		Change	☐ Addition
NAME			3.2 N	AME	1			
STREET ADDRESS			3.3 ST	REET ADDRESS		·		
CITY-ST-ZIP			3.4. C	ITY-ST-ZIP	<u> </u>			
TITLE		DELETE	4.1 Ti	TLE			☐ Change	Addition
NAME			4. 2 N	AME				
STREET ADDRESS			4.3 S1	REET ADDRESS				
CITY+ST-ZIP		- CELETE		TY-ST-ZIP	}			1
TITLE		☐ DELETE	5.1 TI				Change	☐ Addition
NAME ATREET ARRATOR			5.2 N/		1			
STREET ADDRESS				REET ADDRESS				
CITY-ST-ZIP TITLE		☐ DELETÉ	6.1 Tr	TY-ST-ZIP	-		Change	Addition
NAME			6.2 N/				ounde	
STREET ADDRESS				REET ADDRESS				
CITY-ST-ZIP				TY-ST-ZIP]			ľ
14. I hereby o	ertify that the information supplied wil	h this filing does not qualify	for the exe	mption state	ed in S	ection 119.07(3)(i), Florida Statutes. I ful	rther certify that the	e information
officer or o	on t his annual report or supplemental director of the corporation or the rece or Block 13 if changed, or on an attac	iver or trustee empowered to	curate and execute t	d that my sig his report as	nature requir	s shall have the same legal effect as if m red by Chapter 607, Florida Statutes; an	nd that my name ar	nat I am an ppears in