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 # P97000010988 (8)

CLIENT SERVER TECHNICAL SEARCH, INC.

FILED May 07 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						1				
1728 SW 14		1728 SW 14 STREET								
FORT LAUDERDALE FL 33312		FORT LAUDERDALE FL 33312				DO NOT WRITE IN THIS SPACE				
						9 0	ate Incorporated or Qualific		THIS SPACE	
							1/31/1997	Ju		
2. Principal F	Place of Business	2a. Mailing Address	2a. Mailing Address				Number		- Ar	pplied For
21		<u>⊢</u> \	26				5-0707359		- 	t Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.							¢0.75	Additional
22		27				5 . C	ertificate of Status Desired		Fee Re	
City & Stat	le	City & State	City & State			6. El	ection Campaign Financine		\$5.00	May Be
23	_	28				1	ust Fund Contribution			
Zip	Country	Country			8. Tr	is corporation owes or has	paid th	ne current year Int	angible	
24	25	29	30			Pe	rsonal Property Tax due J	une 30.	Yes 🟃	No due
	9. Name and Address of Curre	nt Registered Agent				10. N	ame and Address of New	Regist	ered Agent	
	(LAS, LISA		E	31	Name					
	28 SW 14 STREET		82 Street Ac			ress (P.O.	Box Number is Not Acces	otable)		
FC	ORT LAUDERDALE FL 33312		<u>ll</u>			· · · · · · · · · · · · · · · · · · ·		<u>.</u>		
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			ē	4	City				85 Zip	Code
dd Does	10-1-07-07	00 007 4000 El					T-24-11-1-1-11-11-11-11-11-11-11-11-11-11-1		FL 65 Zip	
11. Pursuant to the provisions of Socions 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 Signature, lyped or printed name of registered agent and lette if applicable (NOTE Registered Agent signature required when reinstating) DATE										
Signature, typod or printed name of togistered agent and left if applicable (NOTE Re 12. OFFICERS AND DIRECTORS				Agent	signature recjuir		DITIONS/CHANGES TO O			PS IN 12
TITLE	CHI ICA ICA AIC	OFFICERS AND DIRECTORS DELETE			13. 1.1 TITLE		JITONS/CHANGES TO O	rioena	Change	Addition
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STREET ADDRESS			6.3 STRE		INBESS					
CITY-ST-ZIP			6.4 CITY							
	L certify that the information supplied w	with this bling does not qualify for				Section 1	19 07(3)(i) Florida Statute	s I furth	er 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 trusted 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

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