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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000016698 (7)

COMMAND SYSTEMS OF SOUTH FLORIDA, INC.

## FILED Mar 11 1998 8:00am Secretary of State

Principal Place of Business   Make   Address   700 NW 2811 8T. STE. 109   MIAMI Ft. 33122					
Property   STATE   109   MAMER   1.3012   STATE   109   MAMER   1.3012   STATE   109   MAMER   1.3012   STATE   109   MAMER   1.3012   STATE   1.00   STAT	Principal Place of Business	Mailing Address		{	i Bitiko givilo solol ildii sool
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2. Principal Place of Husines 2. Misting Address 2. Solid, April 4, etc. 3. So				DO NOT WITH IN THIS CO	ADC.
Principal Place of Placences   2a. Milling Address   2b. Milling Address   2c. Milling					ACE
2.					
Suite, Apt #, etc.    State, Apt #, etc.   State   Sta	2. Principal Place of Business	2a. Mailing Address			Applied For
City & State  Ci	21	26		65-036342-0	Not Applicable
City & State   City & City		Suite, Apt. #, etc.		6. Certificate of Status Desired	• • • • • • • • • • • • • • • • • • • •
28	22				
Zip   Country   Zip   South   South   Zip   South		1 1 1			
9. Name and Address of Current Registered Agent  9. Name and Address of New Registered Agent  9. Name and Address (P.O. Box Number is Not Acceptable)  9. Name and Address (P.O. Box Number is Not Acceptable)  9. Name and Address (P.O.			Country		
Name and Address of Current Registered Agent   10, Name and Address of New Registered Agent	<del></del> '		<del> </del>		1
The moves and to the provisions of Sections 607 (1509 and 607 1508, Florida Statutos, the above-named corporation submits this statement for the purpose of changing its registered agent to the provisions of Sections 607 (1509 and 607 1508, Florida Statutos, the above-named corporation submits this statement for the purpose of changing its registered agent to primite with, and decept the obligations of Sections 607 (1509 and 607 1508, Florida Statutos, the above-named corporation submits this statement for the purpose of changing its registered agent to primite with, and decept the obligations of Sections 607 (1509 and 607 1508, Florida Statutos, Toronto Statutos, Toront					jent
2   Struct Address (P.O. Box Number is Not Acceptable)   82   Struct Address (P.O. Box Number is Not Acceptable)   83	MONGE, AUGUSTO		81 Name		
MIAMI FL 33122    B8			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
Section   Sect	MIAMI FL 33122				
1. Pursuant to the provisions of Sections 607 05:09 and 607 15:08, 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 and familiar with, and faceties that configurations of Section 607 05:05, Florida Statutes.  SIGNATURE    Signature   Signatu			83		
1. Pursuant to the previsions of Socions 607 0:000 and 607 1:000. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent I am familiar with, and accept the obligations of, Section 607 0:505, Florida Statutes.    SIGNATURE			84 City		85 Zip Code
office or registered agent, or both, in the State of Fiorids, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent profile with, and accept the obligations of, Section 607 0505, Florida Statutes.  SIGNATURE  12. OF FICTRS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  15. OFFICTRS AND DIRECTORS  16. TITLE  16. TITLE  17. TITLE  17					
Name	office or registered agent, or both, in the State	<ul> <li>of Florida, Such change was</li> </ul>	authorized by the corporal	poration submits this statement for the purpose of clinical statement for cl	nanging its registered
12.	SIGNATURE V				
TITLE					IRECTORS IN 12
NAME   STREET ADDRESS   TOO   TOO NW 25TH ST., STE. 109   TOO NW 25TH ST., STE., S					
STREET ADDRESS   7500 NW 25TH ST., STE. 109	I —			-	
Addition   City-Si-ZiP   MIAMI FL 33122		09	1.3 STREET ADDRESS		
NAME  SIREEI ADDRESS  CITY-SI-ZIP  TITLE  DELETE  3.1 TITLE  3.2 NAME  STREET ADDRESS  CITY-SI-ZIP  TITLE  DELETE  3.3 STREET ADDRESS  CITY-SI-ZIP  TITLE  DELETE  4.1 TITLE  ADDRESS  CITY-SI-ZIP  TITLE  DELETE  4.2 NAME  4.2 NAME  STREET ADDRESS  CITY-SI-ZIP  TITLE  DELETE  4.3 STREET ADDRESS  CITY-SI-ZIP  TITLE  DELETE  5.1 TITLE  NAME  STREET ADDRESS  CITY-SI-ZIP  TITLE  DELETE  5.3 STREET ADDRESS  CITY-SI-ZIP  TITLE  DELETE  5.3 STREET ADDRESS  CITY-SI-ZIP  TITLE  DELETE  5.1 TITLE  ADDRESS  CITY-SI-ZIP  TITLE  DELETE  5.1 TITLE  ADDRESS  CITY-SI-ZIP  TITLE  DELETE  5.1 TITLE  ADDRESS  CITY-SI-ZIP  TITLE  DELETE  5.4 CITY-SI-ZIP  TITLE  ADDRESS  CITY-SI-ZIP  TITLE  DELETE  5.4 CITY-SI-ZIP  TITLE  ADDRESS  CITY-SI-ZIP  TITLE  DELETE  6.1 TITLE  ADDRESS  AD	SHIELD PL ANIAN		1.4 CHTY-ST-ZIP		İ
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NAME 62 NAME					
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STREET ADDRESS   6.3 STREET ADDRESS	NAME	☐ DELETE	9	L-1	
		DELETE	62 NAME	L.	
64 CITY-ST-ZIP 64 CITY-ST-ZIP 64 CITY-ST-ZIP 64 CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information	STREET ADDRESS	DELETE	62 NAME 63 STREET ADDRESS	<u>.</u> .	

4. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 eath; that I am an officer or director of the comprehenses the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE

3/98 305 591-4330