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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

P97000027282 (7)

DOCUMENT # SPECIALIZED INFORMATION MANAGEMENT ASSOCIATES, I

FILED Apr 16 1998 8:00am Secretary of State



Principal Maci	e of Business	Mailing Address				
	VATER HARBOR DRIVE		1850 CLEARWATER HARBOR DRIVE			
LARGO FL 33	3770	LARGO FL 33770				DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						03/21/1997
2 Principal P	lace of Business .	2a. Mailing Address	 			4. FEI Number Applied For
217887	Brun Mir Paga	PO BOY	36	2		59-3436563 Not Applicable
Suite, Apt.	# etc.	Suite, Apt. #, etc.	. 00	<u>u</u>		60.75 Additional
22 Sui	1. 236	27				5. Certificate of Status Desired Fee Required
City & State	2	City & State	<u> </u>			
23 LAR	.	28 LARGO	40	RI	DA	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip		untry		8. This corporation owes or has paid the current year Intangible
24 337	73 25 USA	33779	30	O'	SA	Personal Property Tax due June 30. Yes No
31, 00 7	9. Name and Address of Current		1001	T,		10. Name and Address of New Registeres Agent
CO	LE, MICHAEL G	 		81	Name	
1850 CLEARWATER HARBOR DRIVE				82	Object 4	Address (D.O. Day N. myles is Alex Assessable)
1	LARGO FL 33770				Street A	Address (P.O. Box Number is Not Acceptable)
	TOP TE ONLY			83		
				84	City	FL 85 Zip Code
11 Pursuant	to the provisions of Sections 607 0502	and 607 1508. Florida Sta	tutes the s	above	-named c	
office or r	egistered agent, or both, in the State of	Florida. Such change wa	s authorize	ed by	the corpo	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
l		-	Florida Sta	atytos	1	1 V.C.O alsolve
SIGNATURE	MICHAEL G. COLE Signature, typed or printed name of registered agent	and title if applicable /A	IOTE Banklay	41	ALCO TO THE	required when reinsteling) . GATE
12,	OFFICERS AND		13.		i i argrigiono i	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	DELETE		TITLE	<u>-</u>	☐ Change ☐ Addition
NAME	MARONEY, DEBORAH L		121	NAME		
STREET ADDRESS	4415 FALLBROOK BLVD				ADDRESS	
CITY-ST-ZIP	PALM HARBOR FL 34685			CITY-S		
TITLE	V	DELETE		TITLE		☐ Change ☐ Addition
NAME	COLE, MICHAEL G			NAME		
STREET ADDRESS	1850 CLEARWATER HARBOR [)R			ADDRESS	
CITY-ST-ZIP	LARGO FL 33770			CITY-S	- 1	
TITLE		☐ DELETE		LITLE	31.4FL	☐ Change ☐ Addition
NAME				NAME		
STREET ADDRESS					ADDRESS	
CITY - ST - ZIP				CITY-S	- 1	
TITLE		DELETE		TITLE	,, , 1,,,	Change Addition
NAME			1	NAME		word with the second se
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP				CITY-S		
TITLE		☐ DELETE		LITLE	1-24	Change Addition
NAME			1	NAME]	
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP TITLE		DELETE		CITY-S	1-211	Change Addition
NAME		الماد ال		NAME	İ	Onlange Advisites
l i					**************************************	
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP			6.4 €	CITY-S	T-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 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 trustee 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 autores.

SIGNATURE:

SIGNATURE:

4/13/98