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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Motthama

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT L Corporation Name

P97000042036 (8)

## FILED Mar 17 1998 8:00am Secretary of State

S/SYSTEMS INC.									44	
Principal Plac	ce of Business		Mailing Address	<u></u> -				T INDUSTRIAND THE TABLE AND IN MORE SAME AND IN CHAIL H	AN BOIDE III	10 QIII 10QI
6530 NE 21 AVE. 6530 NE 21 AVE.										
FT LAUDERDALE FL 33308 FT LAUDERDALE FL 33308								DO NOT WRITE IN THIS SP	ACE	
								3. Date Incorporated or Qualified		<del></del>
								05/08/1997		
2. Principal Place of Business			2a. Mailing Address					4. FEI Number	Αp	plied For
Suite, Apt. #, etc.			Suite, Apt. #, etc.				-	65-0753696		t Applicable
22 Suite, Apr.	. #, OtC.		Suite, Apr. W. etc.					5. Certificate of Status Desired	<b>\$8.75</b> A Fee Re	
City & Stat	1e		City & State	·				6. Election Campaign Financing	\$5.00	<del></del>
23			28					Trust Fund Contribution	Added t	
Zip		Country	Zip	<b>├</b> ¬	ountry	,		8. This corporation owes or has paid the currer		
24		5	29	30	<del></del>			Personal Property Tax due June 30.		] No
9, Name and Address of Current Registered Agent CUCCMAN IOUN D 81 Name								10. Name and Address of New Registered Ag	Brit	
SHERMAN, JOHN R 6530 NE 21 AVE.							_			
FT LAUDERDALE FL 33308					82	Street	Addres	ss (P.O. Box Number is Not Acceptable)		
FI DADDENDALE I E 33300					83					
									T	
					84	City		FL	<b>85</b> Zip 0	Code
11. Pursuant	to the provision	ns of Sections 607.0502	and 607.1508, Florida	Statutes, the	above	e-named	corpor	ration submits this statement for the purpose of cl	anging it:	s registered
agent. I a	registeren age am famikar witt	nt, or both, in the state to and accept the obliga	tions of Section 607.05	05, Florida St	atutes	y ine corp s.	orano	ration submits this statement for the purpose of cl n's board of directors. I hereby accept the appoin	umem as	registered
SIGNATURE	Joh	R. Sken						3/1/	90	
12.	Signature typud o	of FICERS AND	at and tile if applicable.	(NOTE: Registe		ent signature	required	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND D	DECTOR	
TITLE				TITLE		0		Change	Addition	
NAME	{				NAME	ľ		HN R. SHERMAN	-	
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STREET ADDRESS						ADDRESS		•		
CITY-ST-ZIP				6.4	CITY-S	T- ZIP				
14. I hereby	certify that the	information supplied wit	h this filing does not qu	alify for the e	xemp	tion state	d in Se	ection 119.07(3)(i), Florida Statutes. I further certif	that the	information

4. Thereby certify that the information supplied with this tilling does not quality for the exemption stated in Section 119.07(3)(), Florida Statutes. Turther certify that the informatio indicated on this annual report or suppliemental 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 address.

SIGNATURE.

12 Selection

2/1/98

954 486-0929