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 # P97000057983 (3)

SOLUTIONS SERVICES & SUPPORT, INC.

FILED Apr 20 1998 8:00am Secretary of State

Principal Place of Business		Mailing Address					
8360 BERMUDA SOUND WAY BOYNTON BEACH FL 33436		8360 BERMUDA SOUND WAY BOYNTON BEACH FL 33436			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
					06/30/1997	İ	
2. Principal Place of Business		2a. Mailing Address		* ***	4. FEI Number Applied For	7	
21		26			65-0767304 Not Applica	able	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional	1	
22		27			Fee Required		
City & State		City & State			6. Election Campaign Financing \$5.00 May Be		
23		28			Trust Fund Contribution		
Zip	Country	Zip	Cou	ntry	8. This corporation owes or has paid the current year Intangible		
24	25 U.S.	29	30	<u> </u>	Personal Property Tax due June 30. XYes No		
g. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent		
ME	RSKY, SCOTT A ESQ			81 Name	•		
19 WEST FLAGLER STREET			-	82 Street Address (P.O. Box Number is Not Acceptable)			
SUITE 503							
MIAMITEL 33130				83			
				84 City	BS Zip Code	\longrightarrow	
				O4 City	FL 85 Zip Code		
11. Pursuant to the provisions of Sections 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 a	im familiar with, and accept the oblig	gations of, Section 607.0505, Fi	lorida Stati	ites.	Thoration's board of directors. Thereby accept the appointment as registere	١ ١	
SIGNATURE							
OGIVATORIE	Signature, typed or printed name of registered ag		TE Registered	Agent signatur	re required when reinstating) DATE		
12. OFFICERS AN				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P D	DELETE	1.1 10	LĒ	☐ Change ☐ Addi	ition	
NAME	HUGH-SAM, RICHARD R		1.2 NA	ME			
STREET ADDRESS			1.3 ST	3 STREET ADDRESS			
CITY-ST-ZIP	BOYNTON BEACH FL 33436		1.4 CH	Y-ST-ZIP			
TITLE	VD	☐ DELETE	2.1 TIT	LE	☐ Change ☐ Addi	ition	
NAME	HUGH-SAM, MYLENE T		2.2 NA	ME			
STREET ADDRESS 8360 BERMUDA SOUND WAY		2.3 ST	REET ADDRESS				
CITY-ST-ZIP	BOYNTON BEACH FL 33436		2. 4 CI	TY-ST-ZIP		- 1	
TITLE		DELETE	3.1 TIT	LE	Change Addi	tion	

6.4 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 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 address.

3.2 NAME
3.3 STREET ADDRESS

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

3.4. CITY - ST - ZIP

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.4 CITY - ST - ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

TITLE

NAME

TITLE

NAME

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M Lid Ca

Milam T Hunh-Sam

6.3 STREET ADDRESS

11 10 00 1541777-5170

Change

Change

Addition

__ Addition

Addition