

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

FILED  
Apr 17 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Myrtham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000059957 (5)

1. Corporation Name  
AUTOMATED SYSTEMS CORPORATION

Principal Place of Business 8539 N.W. SOUTH RIVER DRIVE MIAMI FL 33178	Mailing Address 8539 N.W. SOUTH RIVER DRIVE MIAMI FL 33178
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 6071 W. Flagler St. Suite, Apt. #, etc. 22 City & State 23 Miami, FL Zip 24 33144 Country 25 Dade	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30	3. Date Incorporated or Qualified 07/09/1997 4. FEI Number 65 0766249 Applied For Not Applicable 5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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8. Name and Address of Current Registered Agent PUIGNAU, JUDITH 8539 N.W. SOUTH RIVER DRIVE MIAMI FL 33178	10. Name and Address of New Registered Agent 81 Name Eduardo Delgado 82 Street Address (P.O. Box Number is Not Acceptable) 6071 W Flagler St 83 84 City Miami FL 85 Zip Code 33144
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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 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Eduardo Delgado DATE: 2/28/98  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	8539 N.W. South River Dr	1.2 NAME	
STREET ADDRESS	MIAMI, FL 33178	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	NAME	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Rolando Verdaguera	2.2 NAME	
STREET ADDRESS	8539 N.W. South River Dr	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FL 33178	2.4 CITY-ST-ZIP	
TITLE	NAME	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	President Eduardo Delgado	3.2 NAME	
STREET ADDRESS	6071 W. Flagler St.	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FL 33144	3.4 CITY-ST-ZIP	
TITLE	NAME	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Vice President Carlos Espindola	4.2 NAME	
STREET ADDRESS	6071 W. Flagler St.	4.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FL 33144	4.4 CITY-ST-ZIP	
TITLE	NAME	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	NAME	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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.

SIGNATURE: Eduardo Delgado DATE: 2/28/98 (305)2639834  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/97)