

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

FILED
Apr 30 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000083235 (6)

1. Corporation Name
DATAMASTERS, INC.



Principal Place of Business
701 W CYPRESS CREEK RD STE 302
FT LAUDERDALE FL 33309

Mailing Address
701 W CYPRESS CREEK RD STE 302
FT LAUDERDALE FL 33309

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 645 NE 4th Avenue		26 645 NE 4th Avenue		09/25/1997	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		E65-0785094	
City & State		City & State		Applied For	
23 Ft. Lauderdale, FL		28 Ft. Lauderdale, FL		Not Applicable	
Zip		Zip		5. Certificate of Status Desired	
24 33304		29 33304		<input type="checkbox"/> \$8.75 Additional Fee Required	
Country		Country		6. Election Campaign Financing	
25 USA		30 USA		Trust Fund Contribution	
				<input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

ARIE MREJEN P.A.
701 W CYPRESS CREEK RD STE 302
FT LAUDERDALE FL 33309

10. Name and Address of New Registered Agent

81 Name	H.N. Higginbotham
82 Street Address (P.O. Box Number is Not Acceptable)	433 Plaza Real
83	Suite 275
84 City	Boca Raton
85 Zip Code	FL 33432

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 *[Signature]* H.N. HIGGINBOTHAM 4/22/98
(NOTE: Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	EXT
NAME	YORK, SONNY	1.2 NAME	XXXXXXXXXXXXXXXXXXXX
STREET ADDRESS	P O BOX 5082	1.3 STREET ADDRESS	XXXXXXXXXXXXXXXXXXXX
CITY-ST-ZIP	FT LAUDERDALE FL 33310	1.4 CITY-ST-ZIP	XXXXXXXXXXXX
TITLE	D	2.1 TITLE	P
NAME	KOENISBERG, JAY	2.2 NAME	KOENIGSBERG, JAY
STREET ADDRESS	4525 POINCIANA ST #12	2.3 STREET ADDRESS	4525 POINCIANA ST., #12
CITY-ST-ZIP	LAUDERDALE BY THE SEA FL 33308	2.4 CITY-ST-ZIP	LAUDERDALE BY THE SEA, FL 33308
TITLE		3.1 TITLE	S,T
NAME		3.2 NAME	HIGGINBOTHAM, H.N.
STREET ADDRESS		3.3 STREET ADDRESS	920 SUNFLOWER AVENUE
CITY-ST-ZIP		3.4 CITY-ST-ZIP	DEIRAY BEACH, FL 33446
TITLE		4.1 TITLE	V
NAME		4.2 NAME	EATON, JOHN W., JR.
STREET ADDRESS		4.3 STREET ADDRESS	19500 CHAMPIONS CIRCLE
CITY-ST-ZIP		4.4 CITY-ST-ZIP	GULFPORT, MS 39503
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
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: *[Signature]* H.N. HIGGINBOTHAM 4/22/98

CR2E034 (10/97)