05-10-1999 90070 018 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9700094061

1. Corporation Name

	DATA SERVICES INTERNAT									
Principal Place of Business Mailing Address										
1030 CHARMINGFARE COURT WESLEY CHAPEL FL 33543 WESLEY CHAPEL FL 33543							DO NOT WRITE IN T	HIS SPACE	<u> </u>	
						-	3. Date Incorporated or Qualifed	THO OF AGE		
							10/31/1997			
2. Principal P	lace of Business	2a. Mailing Address					1. FEI Number		App	lied For
21	<u></u> .	26					59-3505966		Not	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc	S				5. Certifcate of Status Desired	• • •	75 Ad e Req	dditional uired
City & State	е	City & State	<del>-</del>			•	Election Campaign Financing Trust Fund Contribution	•	.00_M ded to	lay.Be Fees
Zip	Country	Zip	Cou	untry			This corporation owes the current year			
24	25	29	30				Personal Property Tax.	Yes		□No
	9. Name and Address of Curren	t Registered Agent	. , ,			1	<ol><li>Name and Address of New Registe</li></ol>	red Agent		
1 ADI	DACAS CRECORIO B			81	Name					
LARRACAS, GREGORIO B 1030 CHARMINGFARE COURT				82	Street /	Address	Address (P.O. Box Number is Not Acceptable)			
WESLEY CHAPEL FL 33543										
**E5	CET CHAPEETE 30343			83	i					
				84	City			EL 85	Zip Co	ode
		0 1007 4500 Fl	04-4-4 44-4-				on submits this statement for the purpos	_	o ite n	enistered
office or re	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change	was authorize	d by	the corpo	oration's	board of directors. I hereby accept the a	pointment :	as regi	stered
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable.	(NOTE: Registered	Agen	t signature re	equired wher	n reinstating) DATI			<del></del>
12.		ID DIRECTORS	13.				ADDITIONS/CHANGES TO OFFICERS	AND DIRE	CTOF	S IN 12
TITLE	PD	DELETE 1.1		1.1 TITLE				☐ Cha	ınge	☐ Addition
NAME	LARRACAS, GREGORIO B		1.2 N	1.2 NAME						
STREET ADDRESS	1030 CHARMINGFARE COURT		1.3 \$	TREET	ADDRESS					
CITY-ST-ZIP	WESLEY CHAPEL FL 33543		1.4 C	1.4 CITY-ST-ZIP						
TITLE	VD □ DELETE 2.11		TITLE			Cha	inge	☐ Addition		
NAME	YLAGAN, PEDRO H JR 221		2.2 NAME		ĺ				1	
STREET ADORESS	1221 TREESDALE COURT 23:		2.3 STREET ADDRESS						ĺ	
CITY-ST-ZIP	WESLEY CHAPEL FL 33543	ESLEY CHAPEL FL 33543		ZITY-S	T-ZIP					
TITLE	D .	☐ DELE	TE 3.1 T	TLE				<b>X</b> Cha	ınge	☐ Addition
NAME	ROA, JESUS M		3.2 NAME			-0. 0.00000111	2/ 4	100	,	
STREET ADDRESS	4303 GINGER COVE DRIVE #A	<b>\</b>	3.3 S	TREET	ADDRESS	60	502 5055NI4N A	(L. #)	104	
CITY-ST-ZIP			3.4. 0	3.4. CITY-ST-ZIP		TA	02 SUSSMAN A MPA, FL 33619	<del>-</del>		
TITLE		☐ DELE	TE 4.1 TI	IILE				☐ Chá	ange	Addition
NAME			4.2 N	IAME						ļ
STREET ADDRESS			4 3 S	TREET	ADDRESS					
CITY-ST-ZIP			4.4 C	ITY-S1	r-ZIP					
TITLE		☐ DELE						☐ Cha	ange	☐ Addition
NAME			5.2 N	AME						
STREET ADDRESS			5.3 S	TREET	ADDRESS					
CITY-ST-ZIP				ITY-\$1	T-ZIP					
TITLE		☐ DELE	TE 6.1 T	MLE	T	1		Cha	ange	☐ Addition \

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, of on an attachment with an address, with all other like empowered.

6.2 NAME 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS