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

PROFIT CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

P97000101963 (1) DOCUMENT

TECH SYSTEMS RESOURCES, INC.

FILED May 08 1998 8:00am Secretary of State

Principal Place of Business Mailing Address					- I IMBIITADI IIO FORKI FOORF OOIII MAIII PARDI FIDII O	<u> </u>
18377 NORTHEAST 4TH CT. MIAMI FL 33178		18377 NORTHEAST 4TH CT. MIAMI FL 33179			0.004.05	
					DO NOT WRITE IN THIS 3. Date Incorporated or Qualified	5 SPACE.
					12/01/1997	
2. Principal Place	of Rusiness	2a. Mailing Address			4. FEL Number	Applied For
					65-0803145	Not Applicable
21 Suite, Apt. #, et	1c.		Suite, Apt. #, etc.			\$8.75 Additional
22			27		5. Certificate of Status Desired	Fee Required
City & State City & State					6. Election Campaign Financing	\$5.00 May Be
23	28			Trust Fund Contribution	Added to Fees	
Zip	Country Zip Countr			try	8. This corporation owes or has paid the c	urrent year Intangible
24	25	29 30			Personal Property Tax due June 30.	☐ Yes ☐ No
g, Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent						
MARKS, FRANK M ESQ.				81 Name		
2701 SW 3RD AVE.				Street Add	dress (P.O. Box Number is Not Acceptable)	
MIAMI FL 33129					areas () to: Box Hambor to Hat Accordingly	
			[33		
			ļ.	34 City		. 85 Zip Code
			,	City	F	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						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, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE						
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AF	
	PVST	DELETE	1.1 Titu	E [₽	RES.	Change
	SHERR, DONNA J		1.2 NAJ	AE DA	ARYL OLSTER	
	18377 NORTHEAST 4TH CT.	•	1.3 STR	eet address \mid 💂	00 n. w Ivi svame	
	MIAMI FL 33179		1.4 C/T	r-ST-ZIP	embroke Pune XI. 330	<u> </u>
,)	DELETE	2 1 TM	•	ice pres	Change
	SHERR, DONNA J		2.2 NA)	AE 🤼	SH CANTH LANE	
	18377 NORTHEAST 4TH CT.	,	2.3 STR	EET ADDRESS 🐉	132 MIZNER LANE	
9111 D7 LW	WAMI FL 33179			Y-ST-ZIP	OCA, RATON, FL 33433	
TITLE		☐ DELETE	3.1 TITL	· 9	EC/TRESVERED	
NAME			3.2 NAA	"	DONNA J. SHERK DQU NE QOQLANE	
STREET ADDRESS					026 TE 2022 ME 33/79	
CITY-ST-ZIP	<u> </u>			· · · · · · · · · · · · · · · · · · ·	1. MIAM KA 33/79	
TITLE		☐ DELETE	4.1 HTL	E		Change Addition
NAME			4. 2 NA			
STREET ADDRESS			4.3 STR	EET ADDRESS		
CITY-ST-ZIP				r-\$T-ZIP		
TITLE		☐ DELETE	5.1 TITL	l l		Change Addition
NAME			5.2 NAA	, , , , , , , , , , , , , , , , , , ,		
STREET ADDRESS			5.3 STR	EET ADDRESS		
CITY-ST-ZIP				-ST-ZIP		
TITLE		☐ DELETE	6.1 TETL			Change Addition
NAME			6.2 NAA			
STREET ADDRESS			6.3 STR	EET ADDRESS		
CITY-ST-ZIP		50 AC - 20 - 11 - 12 - 12 - 12 - 12 - 12 - 12		-ST-ZIP	n Section 110 07(3)(i) Florida Statutes I further	THE ALL LANGES

indicated on this annual report or supplied with this limit does not qualify for the exemptor stated in Section 1.19.07(3)(), Florida Statutes. I further certify that the informatio indicated on this annual report or suppliemental annual report is true and accurate and that my signature shalf 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.

305 654-7771