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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 16 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P97000105350 (7)

SBH S	SYSTEMS, INC.				
Principal Pla	ce of Business	Mailing Address		}	F 4818: BIJSA IIJBI BIĞI BEĞI 1891
1601 SHELBURNE LANE 1601 SHELBURNE LANE					
SARASOTA FL 34231 SARASOTA FL 34231					
				DO NOT WRITE IN TH	HIS SPACE
				3. Date Incorporated or Qualified	
P. Dringing of	Diago of Divisions			12/15/1997	
<u> </u>	Place of Business	2a. Mailing Address		X 31-1037188	Applied For
Suite, Apt	# elc	Suite, Apt. #, etc.		N 31-103 110 0	Not Applicable
22		27		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & Sta	ile	City & State		6. Election Campaign Financing	
23		28		Trust Fund Contribution	\$5.00 May Be Added to Fees
Žip	Country	Zip	Country	8. This corporation owes or has paid the	······································
24	25	29	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Register	ed Agent
MCGINNESS, W L 81				ED. F. Butcher	
1800 SECOND ST STE 971				ess (P.O. Box Number is Not Acceptable)	
SARASOTA FL 34236			160		
			83		
			84 City C		85 Zip Code
					*LIIろはみ3」
11. Pursuant to the provisions of Sections 607,0502 and 607,1508. Florida Statutes, the above-pamed 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 register agent. I am familiar with, and accept the appointment as register agent. I am familiar with, and accept the appointment as register.					
SIGNATURE		ter			198
12.	OFFICERS AND		Registered Agent signature require 13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PRESIDENT	DELETE	11 TITLE	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	FRED F. BLYCHER		1.2 NAME		
STREET ADDRESS	1601 SHELBLIKNE L	AME	1.3 STREET ADDRESS		
CITY - ST - ZIP	SARASOTA FL	34231	1.4 City - St - ZiP		
TITLE		☐ DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2 4 CHTY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		****	44 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TIFLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREE1 ADDRESS		
CITY-ST-ZIP	-	Driete	5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		

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

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP