SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON 6R BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S56325 1. Corporation Name

(1)

Aug 05 1998 8:00am
Secretary of State

EII ED

DATUM	APIS, INC.					
Principal Plac	e of Business	Mailing Address				
10500 UNIVERS		10500 UNIVERSITY	CTR DR			
10000 UNIVERS	on on on	170	OIII, PR			
TAMPA FL 33612		TAMPA FL 33612			DO NOT WRITE IN THIS SPACE	
US		US			3. Date Incorporated or Qualified 05/31/1991	
2. Principal P	Place of Business	2a. Mailing Addre)SS		4. FEI Number Applied	For
21		26			59-3070832 Not App	licable
Suite, Apt.	#, etc.	Sulte, Apt. #,	etc.		5. Certificate of Status Desired S8.75 Additional States of Status Desired	nal
22	<u> </u>	27			5. Certificate of Status Desired Fee Require	d
City & Stat	te	City & State			6. Election Campaign Financing \$5.00 May	Be]
23		28			Trust Fund Contribution Added to Fee	s
Zip	Country	Zip	⊢ η	untry	8. This corporation owes or has paid the current year Intangible	8
24	25	29	30	· · · · · · · · · · · · · · · · · · ·	Personal Property Tax due June 30. Yes No	
	9. Name and Address of Curre	nt Registered Agent		81 Name	10. Name and Address of New Registered Agent	
STA	PLETON, MICHAEL W			81 Name		-
	00 UNIVERSITY CTR. DR.			82 Street Add	dress (P.O. Box Number is Not Acceptable)	
	TE 170			83		
TAM	IPA FL 33612			63		
				84 City	FL 85 Zip Code	
11. Pursuani	to the provinces of sections 607 05	02 and 607 1509. Elevide	Statides the el	hous pamed sass	oration submits this statement for the purpose of changing its register	<u></u>
office or	registered agent, or both, in the Stat	le of Florida. Such chang	ge was authorize	ed by the corporal	the purpose of charging its statement for the purpose of charging its register tion's board of directors. I hereby accept the appointment as register	ed
agent. Fa	am fa mili ar with, and accept the obliq	gations of, section 607.0)505, Florida Sta	itutes.		
SIGNATURE	Signature, typed or printed name of registered ag	onl and title if south table	(NOTE Registr	ared Apent singulars re-	equired when reinstaling) DATE	-
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II	V 12
TITLE	D		LETE 1.1 TO			Addition
NAME	STAPLETON, MICHAEL W	0		IAME		
STREET ADDRESS	10500 UNIVERSITY CTR. DR.			l l		100///01
CITY-ST-ZIP	TAMPA FL		1.3 S	TREET ADDRESS		Southon
TITLE				TREET ADDRESS		
	D	DE	1.4 C	ITY-ST-ZIP	Change	
NAME	D ST APLE TON, RAE ANN	[] DE	1.4 C	ITY-ST-ZIP ITLE	Change	
	1 -	DE	1.4 C LETE 2.1 TO 2.2 N	ITY-ST-ZIP ITLE	Change	
NAME	STAPLETON, RAE ANN	[] DEI	1.4 C 1.ETE 2.1 TO 2.2 N. 2.3 S	ITY-ST-ZIP ITLE IAME	Change	
NAME STREET ADDRESS	STAPLETON, RAE ANN 10500 UNIVERSITY CTR. DR.		1.4 C 1.ETE 2.1 TO 2.2 N. 2.3 S	ITY-ST-ZIP ITLE IAME TREET ADDRESS ITY-ST-ZIP	: ¥	
NAME STREET ADDRESS CITY-ST-ZIP	STAPLETON, RAE ANN 10500 UNIVERSITY CTR. DR.		1.4 C 2.1 TI 2.2 N 2.3 S' 2.4 C	ITY-ST-ZIP ITLE IAME YREET ADDRESS ITY-ST-ZIP ITLE	. 4	Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE	STAPLETON, RAE ANN 10500 UNIVERSITY CTR. DR.		1.4 C 2.1 Ti 2.2 N 2.3 S 2.4 C LETE 3.1 Ti 3.2 N	ITY-ST-ZIP ITLE IAME YREET ADDRESS ITY-ST-ZIP ITLE	. 4	Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	STAPLETON, RAE ANN 10500 UNIVERSITY CTR. DR.		1.4 C 1.ETE 2.1 TI 2.2 N 2.3 S 2.4 C 1.ETE 3.1 TI 3.2 N 3.3 S	ITY-ST-ZIP ITLE IAME YREET ADDRESS ITY-ST-ZIP ITLE IAME	. 4	Addition
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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 angular 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.