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Feb 03 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # S98860 (7)

1. Corporation Name
ACCOUNTING BUSINESS SYSTEMS, INC.

Principal Place of Business

1355 ORANGE AVENUE
SUITE 4
WINTER PARK FL 32789

Mailing Address

BOX 915295
LONGWOOD FL 32791-5295
US



3. Date Incorporated or Qualified
12/09/1991

3a. Date of Last Report
05/23/1996

2. Principal Place of Business

21 1260 PALMETTO AVE.

2a. Mailing Address

26 Suite, Apt. #, etc.

22 SUITE C
City & State

27 City & State

23 WINTER PARK, FL
Zip

28 Zip

24 32789 Country
25 USA

29 Country

30 Country

4. FEI Number

59-3095618

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

SCHULLER, CATHLEEN M.
215 NORTH EOLA DRIVE
ORLANDO FL 32801

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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 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, typed or printed name of registered agent, and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME COHEN, JAY M.
STREET ADDRESS 1355 ORANGE AVE. #4
CITY-ST-ZIP WINTER PARK FL

TITLE D ☐ DELETE
NAME SILVERBERG, MARK B.
STREET ADDRESS 1355 ORANGE AVE. #4
CITY-ST-ZIP WINTER PARK FL

TITLE D ☐ DELETE
NAME HAMLIN, J. RUSSELL
STREET ADDRESS 1051 WINDERLEY PL #300
CITY-ST-ZIP MAITLAND FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME D SILVERBERG, MARK B.
2.3 STREET ADDRESS 607 SWEETWATER COVE BLVD SO.
2.4 CITY-ST-ZIP LONGWOOD, FL 32779

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 13, if changed, or on an attachment with an address.

SIGNATURE:

MARK B. SILVERBERG, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-26-97 407-644-5400

Date

Daytime Phone #

0001106

CR2E034 (9/96)