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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(6)

DATASYS INTERNATIONAL CORP.

Principal Place of Business Mailing Address 8113 NW 33RD STREET 13561 SW 110TH AVE MIAMI FL 33122 MIAMI FL 33176 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/23/1991 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 21 26 65-0322103 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zφ 8. This corporation owes or has paid the current year Intangible Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 61 Name SEBBEN, MAURO B 13561 S.W. 110TH AVE. 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33176** 83 84 City 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 it applicable. (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELLITE Change Addition TITLE 1.1 THILE SEBBEN, MAURO B. NAME 1.2 NAME 13561 SW 110TH AVE STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33176** 1.4 CITY - ST - ZIP CITY-ST- NP DELETE Change Addition TITLE 2.1 TITLE SEBBEN, MARIJANE P. NAME 2.2 NAME 13561 SW 110TH AVE STREET ADDRESS 2.3 STREET ADDRESS **MIAMI FL 33176** CITY-ST-ZIP 2 4 CITY-S1-7P DELETE Change \_\_\_ Addition THUE 3 1 THILE NAME 32 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 34. CITY-S1-7IP DELETE Change ☐ Addition 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE

14. Thereby 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 each, 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.

5.1 TITLE

5.2 NAME

6.1 111LE

6.2 NAME

DELETE

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

5.4 CITY - ST - ZIP

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

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Addition

**FILED** 

Jan 21 1998 8:00am

Secretary of State