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PROFIT CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **V09939**

1. Corporation Name
PAYROLL MANAGEMENT SOLUTIONS, INC.



Principal Place of Business
2451 MCMULLEN BOOTH ROAD
STE #239
CLEARWATER FL 34619
US

Mailing Address
P. O. BOX 238
OLDSMAR FL 34677

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 172 Brighton Ct

2a. Mailing Address
26 Suite, Apt. #, etc.

City & State
23 Safety Harbor, FL

City & State
28

Zip Country
24 34695 25 USA

Zip Country
29 30

3. Date Incorporated or Qualified
01/29/1992

4. FEI Number
59-3102180

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 owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent

SOTTILE, BARBARA E.
1836 OAK TRAIL E. APT. 208
CLEARWATER FL 33764

10. Name and Address of New Registered Agent

81 Name Lawrence M. DeLuca
82 Street Address (P.O. Box; Number is Not Acceptable) 172 Brighton Ct
83
84 City Safety Harbor, FL 85 Zip Code 34695

11. Pursuant to the provisions of Sections 607.0501 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 *Lawrence M. DeLuca - President*

DATE **4/22/99**

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DELETE
 NAME **DPT DE LUCA, PETER J. SR.**
 STREET ADDRESS **172 BRIGTON COURT**
 CITY-ST-ZIP **SAFETY HARBOR FL 34695**

1.1 TITLE Change Addition
 1.2 NAME **Lawrence M. DeLuca**
 1.3 STREET ADDRESS **172 Brighton Ct.**
 1.4 CITY-ST-ZIP **Safety Harbor, FL 34695**

TITLE DELETE
 NAME **DVP DE LUCA, PETER J. JR.**
 STREET ADDRESS **413 PAUL DRIVE**
 CITY-ST-ZIP **MOORESTOWN N. 08057**

2.1 TITLE Change Addition
 2.2 NAME
 2.3 STREET ADDRESS
 2.4 CITY-ST-ZIP

TITLE DELETE
 NAME **S SOTTILE, BARBARA**
 STREET ADDRESS **1836 OAK TRAIL E. APT. #208**
 CITY-ST-ZIP **CLEARWATER FL 33764**

3.1 TITLE Change Addition
 3.2 NAME **Sottile, Barbara**
 3.3 STREET ADDRESS **172 Brighton Ct**
 3.4 CITY-ST-ZIP **Safety Harbor, FL 34695**

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

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 included 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 change, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Lawrence M. DeLuca* Lawrence M. DeLuca 4/22/99 727-669-8987

CR2E034 (1/98)