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

CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V15134

DATA-DRIVEN DESIGN, INC.

Principal Place of Business

(2)

Mailing Address

FILED
Jun 16 1997 8:00am
Secretary of State



15329 HARBOR MADEIRA BEAC		MADEIRA BEACH FL 3	3708-1820				
					3. Date Incorporated or Qualified 02/19/1992	3a. Date of Last Ro 06/27/1996	eport
2. Principal Place of Business 28. Mailing Ad		28. Mailing Address	dress		4. FEI Number		
21		26			59-3110125	Not Applicable	
Suite, Apt	#, etc.	Suite, Apt. #. etc.			5. Certificate of Status Desired	□ \$8.75 A	dditional
22		27			Of Certificate of Status Desired	Fee Re	quired
City & State		City & State	City & State		6. Election Campaign Financing \$5.00 May Be		
23	28			Trust Fund Contribution Added to Fees			
Zφ	Country	Zip	Zip Country		8. This corporation has liability for intangible tax under s. 199.032,		
24	25	29					
	9. Name and Address of Cu	rrent Registered Agent		T	10. Name and Address of New Reg	listered Agent	
	er, steven J.		81	Name			
15329 HARBOR DRIVE		82	Street Addr	eet Address (P.O. Box Number is Not Acceptable)			
MAD	EIRA BEACH FL 33708						
I			83				
			84	City		85 Zip C	ode
						FL	
11. Pursuant office or r agent. I a	to the provisions of Sections 607, registered agent, or both, in the Sum familiar with, and accept the ol	0502 and 607.1508, Florida St tate of Florida. Such change w bligations of, Section 607.0505	latules, the abov vas authorized b 5, Florida Statute	e-named corp y the corporat s.	poration submits this statement for the pi tion's board of directors. I hereby accep	urpose of changing its tithe appointment as r	registered egistered
SIGNATURE	Signature, lypod or printed name of registered	o agent and title if applicable	: (NOTE: Heg-stored Ag	ent signature requir	red when remstating)	DATE	
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTOR	S IN 12
TITLE	PST	☐ DELETE	1.1 TITLE			☐ Change	Addition
NAME	MILLER, STEVEN J.		1.2 NAME				
STREET ADDRESS	15329 HARBOR DRIVE		1.3 STREE	ADDRESS			
CITY-ST-ZIP	MADEIRA BEACH FL		1.4 CHY-5	ST-ZIP			
TITLE	D	DELETE	2 1 TITLE			Change	Addition
NAME	MILLER, STEVEN J.		2.2 NAME				
STREET ADDRESS	15329 HARBOR DRIVE		2.3 STREE	ADDRESS			
CITY-ST-ZIP	MADEIRA BEACH FL		2. 4 CITY-	ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE			☐ Change	☐ Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREE	ADDRESS			
CITY-ST-ZIP			3.4 City-	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREE	ADDRESS			
CITY-ST-ZIP			4.4 CITY- S	ST-ZIP			
TATLE		DELE TE	5.1 TITLE			☐ Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	ADDRESS			
CITY-ST-ZIP			5.4 CITY-S				
TITLE		DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME				_ ` `
STREET ADDRESS			6.3 STREE	ADDRESS			
				1			
CITY-ST-ZIP	by earlify that the information cur-	alied with this films does not a	6.4 CITY-5		in Section 119 07(3Vi). Florida Statutes	I further costifue that t	

new relative minimum in information supplied with this tiling does not quality for the exemption stated in Section 119.07(3)(i). Florida Statules, 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 eath; 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 Statules; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

THAN MY MICHIEL IN

(0,2) 367 5667