## 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 # V34141

(4)

CIS-SOUTHFLORIDA, INC.

Principal Place of Business	Mailing Address			OTOTA OTOTA CITAL CITAL STORY FOR
% JUERGEN R. BROETZ	% JUERGEN R. BROETZ			
109 RIVIERA ST.	109 RIVIERA ST.			
LEHIGH ACRES FL 33936	LEHIGH ACRES FL 33936	•	DO NOT WRITE IN T	HIS SPACE
			3. Date Incorporated or Qualified	
2. Principal Place of Business	2a, Mailing Address		05/06/1992 4. FEI Number	Applied For
21	26		65-0321272	Applied For Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22	27		5. Certificate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23	28		Trust Fund Contribution	Added to Fees
Zip Country	Zip	Country	8. This corporation owes or has paid the	current year Intangible
24 25	29	30	Personal Property Tax due June 30.	Yes No
9. Name and Address of Cur	rent Registered Agent		10. Name and Address of New Registe	red Agent
Broetz, Juergen R.		81 Name		
109 RIVIERA ST.		82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
LEHIGH ACRES FL 33936		83		
		63		
		84 City		FL 85 Zip Code
<ol> <li>Pursuant to the provisions of Sections 607.0         office or registered agent, or both, in the St.</li> </ol>	0502 and 607.1508, Florida Statute	es, the above-named corp	poration submits this statement for the purpo-	se of changing its registered
agent. I am familiar with, and accept the ob	oligations of, Section 607.0505, Flo	rumojized by the corporat orida Statutes.	tion's board of directors. I hereby accept the	appointment as registered
SIGNATURE JUERGEN R. BROE	TZ PRESIDENT	-Vlan 7	1 { ( '	4198
Signature, typed or printed name of registered	agent and little if applicable. (NOTE	F: Registered Agent signature requir		TE
	AND DIRECTORS  DELETE	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12  Change Addition
D D D D D D D D D D D D D D D D D D D	L DELETE	1.1 TELE		Li cliange Li Audilion
NAME BROETZ, JUERGEN R STREET ADDRESS 109 RIVIERA ST.		1.2 NAME		
APPROVE ASSESSED FLANCAS		1.3 STREET ADDRESS		
TITLE LEHIGH ACHES FL 33938	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME	Last State 1	2.2 NAME		C study C reaction
STREET ADDRESS		2.3 STREET ADDRESS		
CiTY-ST-ZIP		2. 4 CITY-ST-ZIP		
TITLE	☐ DELETE	3.1 TITLE		Change Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY-ST-ZIP		
TITLE	DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CiTY-\$T-ZiP		4.4 CITY - ST - ZIP		
TITLE	DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		ļ
CITY-ST-ZIP		5.4 CITY - ST - ZIP		
TITLE	DELETE	6.1 TITLE		Change Addition
NAME		6.2 NAME		
STREET ADORESS		6.3 STREET ADDRESS		
CITY-\$1-7IP		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 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 Block 13 if chapted, or on an attachment with an address.

SIGNATURE:

JUERGEN & BROETZ

1/19/98

1941 368 - 0284

**FILED** 

Jan 28 1998 8:00am

Secretary of State