FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 May 06 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State **ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # V39860 (4) ANNEX SYSTEMS, INC. Principal Place of Business Mailing Address 1211 N. WESTSHORE BLVD 1211 N. WESTSHORE BLVD # 111 DO NOT WRITE IN THIS SPACE TAMPA FL 33607 TAMPA FL 33607 3. Date Incorporated or Qualified 05/26/1992 2. Principal Place of Business 2a, Mailing Address 26 P.O. Box 3292 Applied For 4071 Forecast Not Applicable 59-3126508 Suite, Apt. #, etc. \$8,75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 8. Election Campaign Financing \$5,00 May Be Brandon Kiverview Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible USA USA-29 33568-3292 30 TV Yes ∏ No Personal Property Tax due June 30. 25 9. Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent 81 Name MILLER, RANDELL 315 S HYDE PARK AVE 82 Street Address (P.O. Box Number is Not Acceptable) TAMPA FL 33606 83 84 City Zip Code 85 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, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when roinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Addition TITLE 1.1 TITLE Change FORD, JOHN M. NAME 1.2 NAME 4071 FORECAST DR STREET ADDRESS 1.3 STREET ADDRESS BRANDON FL 33511 CITY-ST-ZIP 1.4 CITY-S1-ZIP DELETE Addition TITLE 21 TITLE Change NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-ZIP TITLE DELETE 4.1 THILE Change ■ Addition NAME 4, 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE Change Addition 51 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREFT ADDRESS

CITY-ST-ZIP 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 changed, or on an attachment with an address

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

☐ Change

Addition

DELETE

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME