Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90224 040 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Kathe ine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P98000017056

1. Corporation Name

IZGREE	n software so	OLUTIONS,	INC.												
Principal P ace	of Business		Mailing Address					111		8 i 9 i 19 i i 18 i	III) <b>BB</b> ()) (		II 1991I 1891	I WOIGH R	1111 <b>F</b> #111 1 ##1
3320 ROBINHO TALLAHASSEE		3320 ROBINHOOD RD TALLAHASSEE FL 32312						I	TON OC	WRITE	IN THE	S SPACI	Ė		
							3.	Date In	corporate						
									/1998						
2. Principal Pl	ace of Business		2a. Mailing Address				4. 1	FEI Nu	mber					Apr	lied For
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Suite, Apt.	#, etc.		Suite, Apt. #, etc.		•		5 /	Cartifo	ite of Stat	ue Desire	- I				Iditional
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23			28						und Conti					ded to	Fees
Zip	Court	ry	Zip	Cou	ntry				rporation		current	tyear r		1	٦.,
24	25		29	30					al Propert				☐ Yes	<u> </u>	
	9. Name and Addr	ess of Current	Registered Agent		81	Name		Name	and Add	ess of N	ew Keç	JIStere	Agent		
DOO.	T, ROBERT D JR														
	ROBINHOOD RD				82	Street Ac	dress (P.	O. Box	Number i	s Not Ac	ceptable	∍)			
	AHASSEE FL 3231	2			02										
IALL	ANASSEE FL 3231	٤			83										
					84	City	· <del></del>					FI	85	Zip C	ode
11 Pureuent	to the provisions of Se	etions 607.0502										<del>-</del>		- 14	
		CHOIR OUT USUZ	and 607.1508, Florida Stat.	utes, the a	bove-r	named cc	rporation	submit	s this stat	ement for	r the pu	rpose o	of changii	ng its r	egisterea .
fine or re	egistered agent, or bot	h. ⊧n the State ci	and 607.1508, Florida Stati f Florida. Such change was ons of, Section 607.0505, F	authorized	ı by th	named co e corpora	rporation ation's boa	submir ard of d	s this stat irectors. I	ement for hereby a	the pu accept t	rpose o	of changing introduction of the change of th	as reg	stered
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6.4 CITY-ST-ZIP CITY-ST-ZIP 14. I herebit certify that the information supplied with this filing does not qualify to the exempted stated in Section 119.07 (3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual reports true and appears 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 of trusted empowers 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 organ attacts then the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of trusted empowers 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 organ attacts then the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of trusted empowers to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

5.3 STREET ADDRESS

63 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRE SS

STREET ADDRE 3S

CITY-ST-ZIP

DELETE

850-386-3178

☐ Change

Addition