FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # P10302 (8)

CHAMPION COMPUTER CORPORATION						
Principal Place of Business Mairing Address				I SANITAN INTERNITATION DESIGNATION DENI	å filli Sillit Billit Athit blæis Grans Ason 1641	
6421 CONGRES		6421 CONGRESS AVE BOCA RATON FL 334				
				3. Date Incorporated or Qualified		
				06/02/1986	05/01/1995	
Principal Place of Business		2a. Maling Address		4. FEI Number 59-2347579	Applied For Not Applicable	
		26		397234/3/8	\$8.75 Additional	
Suite, Apt. #	, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	Fee Required	
City & State		Oily & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
3	Country	28 Zip	Country	8. This corporation has liability fo		
Zip 4	25	29	30	Florida Statutes	es DNo	
4	9. Name and Address of Curre			10. Name and Address of New	Registered Agent	
			81 Name			
DAVED A	MCHAEL H		82 Street A	Address (P.O. Box Number is Not Accept	able)	
BAKER, MICHAEL H. 82 2340 NW 41 ST			12			
	ATON FL 33431		83			
DOORTE	(10)(10)		84 City		85 Zip Code	
			[1] 13	reporation submits this statement for the property account the ar	FL	
CICNATUSE:	h, and accept the obligations of Ser		gants. Doğuk və Ajevi siyin rev	and twice besiding	DATE DISCOTORIGINATO	
12.	OFFICERS A	NO DIRECTORS	13.	ADDITIONS/CHANGES TO U	FFICERS AND DIRECTORS IN 12 Change	
TITLE	/ C	☐ DELETE	1 1 TI*LF	a year Michael H	Condition 1	
NAME	BAKER, MICHAEL H.		1.2 NAME	Baker, Michael H 2340 Noval St Boca Raton		
STREET ADDRESS	2340 NW 41 ST		1.3 STREET ACCRESS	a. Reston	2(
CITY-ST-ZIP	BOCA RATON FL			Coea (6 01)	Change Addition	
TITLE	P	☐ DELETE	2 1 THLF			
NAME	PYLE, CHRISTOPHER		2.2 NAME			
STREET ADDRESS	18 BRINY BREEZE BLVD.		2.3 STREET ADDRESS			
CITY ST-ZIP	BOYNTON BEACH FL	☐ DELETE	2.4 CITY : \$1-715 3.1 THEE		Change Addition	
TITLE	D BAVED MELICOA	Пист	3 2 NAME			
NAME	BAKER, MELISSA 2340 NW 41 ST		3.3 STREET ADDRESS			
STREET ADDRESS	BOCA RATON FL		3.4 CiTY-ST-ZIP			
CITY-ST-ZIP TITLE	BOOK MICH FL	DELETE	4 1 Tifut		Charge Addition	
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
City-ST-ZIP	İ		4.4 CHY \$1 - ZIP			
TITLE		☐ DELETE	5 1 T-'LF		Change Addition	
NAME	1		5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY - ST - ZIP			5 4 CITY - ST - ZiP			
Titus		DELETE	6.17915		Change Addition	

14. If do hereby certify that the information supplied with this filling is voluntarly furnished and does not quark, for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this angular report or supplemental annual report is true and accurate and that my significant shall have the same legal effect as if made under coath; that I am an officer or director of the dorderation of the respicer opticate 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 of this instactionary trying address.

6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4.23-96 4079972900 Captrol 407