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May 07, 1999 8:00 am
Secretary of State

05-07-1999 90168 040 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P26530

1. Corporation Name
COMPUSA, INC.

Principal Place of Business

**14951 N DALLAS PKWY
DALLAS TX 75240
US**

Mailing Address

**18451 N. DALLAS PARKWAY
DALLAS TX 75287
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/31/1989

4. FEI Number

75-2261497

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

26 **14951 N. Dallas Pkwy**

Suite, Apt. #, etc.

27 **Attn: Tax Dept**

City & State

28 **Dallas TX**

Zip

29 **75240**

Country

30 **US**

9. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYES STREET
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **VPC** ☒ DELETE

NAME **GATCH- PRIEST, ROBYN**
STREET ADDRESS **14951 N DALLAS PKWY**
CITY-ST-ZIP **DALLAS TX**

TITLE **EVPF** ☐ DELETE

NAME **SKINNER, JAMES E**
STREET ADDRESS **14951 N DALLAS PKWY**
CITY-ST-ZIP **DALLAS TX**

TITLE **EVP** ☐ DELETE

NAME **MONDRY, LARRY**
STREET ADDRESS **14951 N DALLAS PKWY**
CITY-ST-ZIP **DALLAS TX**

TITLE **PCEO** ☐ DELETE

NAME **HALPIN, JAMES**
STREET ADDRESS **14951 N DALLAS PKWY**
CITY-ST-ZIP **DALLAS TX**

TITLE **EVPC** ☐ DELETE

NAME **COMPTON, HAL**
STREET ADDRESS **14951 N DALLAS PKWY**
CITY-ST-ZIP **DALLAS TX**

TITLE **DC** ☐ DELETE

NAME **BATEMAN, GILES**
STREET ADDRESS **14951 N. DALLAS PKWY**
CITY-ST-ZIP **DALLAS TX**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **Vice President** ☐ Change ☒ Addition

1.2 NAME **Michael Bryk**
1.3 STREET ADDRESS **14951 N Dallas Pkwy**
1.4 CITY-ST-ZIP **Dallas TX 75240**

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Michael Bryk, Vice President 4-23-99 (972) 982-4000

CR2E034 (1/98)