

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

PROFIT CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P95000025746 (5)**

1. Corporation Name  
**COMPUSVEN INC.**



Principal Place of Business  
**2275 INGLEWOOD COURT  
NAPLES FL 33942**

Mailing Address  
**2275 INGLEWOOD COURT  
NAPLES FL 33942**

3. Date Incorporated or Qualified  
**03/28/1995**

3a. Date of Last Report  
**N/A**

2. Principal Place of Business  
21 **4100 Corporate Square**

2a. Mailing Address  
26 **4100 Corporate Square**

4. FEI Number  
**65-0573455**

Applied For  
Not Applicable

Suite, Apt. #, etc.  
22 **Suite 120**

27 **Suite 120**

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

City & State  
23 **Naples FL**

28 **Naples FL**

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

Zip Country  
24 **33942 USA**

29 **33942 USA**

8. This corporation has liability for intangible tax under s 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent  
**JAMES, SVEN  
2275 INGLEWOOD COURT  
NAPLES FL 33942**

10. Name and Address of New Registered Agent  
81 Name **James, SVEN**  
82 Street Address (P.O. Box Number is Not Acceptable) **4100 Corporate Square**  
83 **Suite 120**  
84 City **Naples FL** 85 Zip Code **33942**

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: *Sven James* **Sven James - president** 1/20/96  
Date

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>D</b> <input type="checkbox"/> DELETE	1.1 TITLE	<b>President/Chairman</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>JAMES, SVEN</b>	1.2 NAME	<b>Sven James</b>
STREET ADDRESS	<b>2275 INGLEWOOD COURT</b>	1.3 STREET ADDRESS	<b>4100 Corporate Square Suite 120</b>
CITY-ST-ZIP	<b>NAPLES FL 33942</b>	1.4 CITY-ST-ZIP	<b>Naples, FL 33942</b>
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: *Sven James* **Sven James** 1/20/96 941 434-2217  
Date Daytime Phone #

CRE034 (12/95)