

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

FILED
May 05 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT #
1. Corporation Name: **PC5000025746**

Principal Place of Business: **CompuSven, Inc.**
4100 Corporate Sq. #120
Naples, FL 33942

Mailing Address: **4100 Corporate Sq. #120
Naples, FL 33942**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **3-28-95**

4. FEI Number: **65-057-3455**

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 or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business

21 **3200 Bailey Lane**
Suite, Apt #, etc

22 **Suite 199**
City & State

23 **Naples FL**
Zip

24 **34105**
Country

25 **USA**

26 **3200 Bailey Lane**
Suite, Apt #, etc

27 **Suite 199**
City & State

28 **Naples FL**
Zip

29 **34105**
Country

30 **USA**

9. Name and Address of Current Registered Agent

Sven James / President/Chairman
4100 Corporate Square #120
Naples, FL

10. Name and Address of New Registered Agent

81 Name: **Sven James / PC**

82 Street Address (P.O. Box Number is Not Acceptable): **3200 Bailey Lane**

83 **Suite #199**

84 City: **Naples** FL 85 Zip Code: **34105**

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** (Signature) DATE: **4-3-98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: <input checked="" type="checkbox"/> DELETE	Sven James / PC	11 TITLE: <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	President/Chairman
NAME	4100 Corporate Square #120	12 NAME	Sven James
STREET ADDRESS	Naples, FL	13 STREET ADDRESS	3200 Bailey Lane #199
CITY-ST-ZIP		14 CITY-ST-ZIP	Naples, FL 34105
TITLE: <input type="checkbox"/> DELETE		21 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY-ST-ZIP		24 CITY-ST-ZIP	
TITLE: <input type="checkbox"/> DELETE		31 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE: <input type="checkbox"/> DELETE		41 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE: <input type="checkbox"/> DELETE		51 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		52 NAME	800002511928
STREET ADDRESS		53 STREET ADDRESS	-05/05/98--0115--020
CITY-ST-ZIP		54 CITY-ST-ZIP	***150.00
TITLE: <input type="checkbox"/> DELETE		61 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		62 NAME	12/5/98
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 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 registered agent empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of changed, or original, address.

SIGNATURE: **[Signature]** DATE: **4/14/98** DAYTIME PHONE #: **941-434-2217**

CR2E034 (10/97)