## FILE NOW: FILING FEE AFTER MAY 1 IS \$550

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENSTATE

## Sandra B. Mon

Secretary of S DIVISION OF CORPCONS

1997

DOCUMENT # P95000045944 (2) S.L.I. COMPUTOR SERVICES, INC.

**FILED** Apr 21 1997 8:00am Secretary of State



22 City & State Country Zip Qip Qip A Trust Fund Contribution A This corporation has liability for intangible, tax or Florida Statutes Provide Statutes Qip Qip A Trust Fund Contribution A This corporation has liability for intangible, tax or Florida Statutes Qip Qip Qip A This corporation has liability for intangible, tax or Florida Statutes Qip Qip Qip A This corporation has liability for intangible, tax or Florida Statutes Qip Qip Qip A This corporation has liability for intangible, tax or Florida Statutes Qip Qip Qip Qip A This corporation has liability for intangible, tax or Florida Statutes Qip Qip Qip Qip A This corporation has liability for intangible, tax or Florida Statutes Qip Qip Qip Qip Qip Qip A This corporation has liability for intangible, tax or Florida Statutes Qip	Applied For Not Applicable 75 Additional ee Required 5.00 May Be dded to Fees nder s. 199.032.  Zip Code  aging its registered ent as registered
2. Principal Place of Business	Applied For Not Applicable 7.75 Additional ee Required 5.00 May Be dded to Fees nder s. 199.032,  Zip Code aging its registered ent as registered
2. Principal Place of Business	Not Applicable  7.75 Additional ee Required  5.00 May Be dded to Fees nder s. 199.032,  Zip Code aging its registered ent as registered
Suite, Apt. #, etc  Suite, Apt. #, etc  Suite, Apt. #, etc  City & State  City & State	.75 Additional ee Required 5.00 May Be dded to Fees nder s. 199.032,  Zip Code aging its registered ent as registered
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City & State  Strict Address of Country  City	Zip Code  aging its registered ent as registered
Trust Fund Contribution A  Trust Fund Contribution A  Trust Fund Contribution A  A Trust Fund Contribution A  S. This corporation has liability for intangible tax ur Florida Statutes Yes A  S. Name and Address of Current Registered Agent  MANDEL, ROBERT D  3724 S.E. FAIRWAY EAST STUART FL 34997  13  14 City FL 85  11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the yee-named corporation submits this statement for the purpose of charding office or registered agent, or both, in the State of Florida Such change was authorizely the corporation's board of directors. I hereby accept the appointm agent I am familiar with and accept the obligations of, Section 607.0505, Florida Stes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  13 SETADDRESS  THANK MANDEL, DOLORES M  3724 S.E. FARWAY EAST  THANK MANDEL, FARWAY EAST  THANK STREEL ADDRESS  THANK TRUST Fund Contribution  Trust Fund Contribution  A Trust Fund Contribution  Florida Statutes  Trust Fund Contribution  In A Street Address (P.O. Box Number is Not Acceptable)  Agent Address (P.O. Box Number is Not Acceptable)  Acceptable to the provisions of Sections 607.0505, Florida Statutes, the yee-named corporation submits this statement for the purpose of charding the corporation's board of directors. I hereby accept the appointment of registered agent and the it applicable  (NOTE Registe/Applicative required whom remaining)  DATE  12. OFFICERS AND DIRECTORS  13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  THANK MANDEL, DOLORES M  3724 S.E. FARWAY EAST  THANK TRUST FUND FOR A TRUST	Zip Code  aging its registered ent as registered
Zip   Qry   8. This corporation has liability for intengible tax ur   Florida Statutes   Yes	Zip Code Iging its registered ent as registered
9. Name and Address of Current Registered Agent  MANDEL, ROBERT D  3724 S.E. FAIRWAY EAST STUART FL 34997  10. Name and Address of New Registered Agent  MANDEL, ROBERT D  3724 S.E. FAIRWAY EAST STUART FL 34997  13  14 City  FL 85  15  16  17  18  18  19  19  10  10  11  11  12  12  13  14 City  FL 85  15  15  16  17  18  18  18  18  18  19  19  19  19  19	Zip Code Iging its registered ent as registered
9. Name and Address of Current Registered Agent  MANDEL, ROBERT D  3724 S.E. FAIRWAY EAST STUART FL 34997  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the yve-named corporation submits this statement for the purpose of char office or registered agent, or both, in the State of Florida. Such change was authorizby the corporation's board of directors. I hereby accept the appointm agent I am familiar with and accept the obligations of, Section 607.0505, Florida Stes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  11. PLIES D  MANDEL, DOLORES M  3724 S.E. FAIRWAY EAST  13. SIRELEADORESS  3724 S.E. FAIRWAY EAST  13. SET ADDRESS  3724 S.E. FAIRWAY EAST  13. SET ADDRESS	Zip Code Iging its registered ent as registered
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STUART FL 34997    A	nging its registered ent as registered ECTORS IN 12
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the yeanamed corporation submits this statement for the purpose of charge of registered agent, or both, in the State of Florida. Such change was authorized the corporation's board of directors. I hereby accept the appointm agent I am familiar with and accept the obligations of, Section 607.0505, Florida Stes.  SIGNATURE  Signature: hyperfor printed name of registered eigent and title if applicable.  NOTE: Registe/spent signature required when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  THEE DOLORES M  3724 S.E. FAIRWAY EAST  13 SET ADDRESS  CHART FILE 1.24077	nging its registered ent as registered ECTORS IN 12
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SIGNATURE  Signature: typed or perited harris of registered agent and title if applicable (NOTE Registered whon reinstating)  12. OFFICERS AND DIRECTORS  TIRE  NAME  MANDEL, DOLORES M  1.2 IE  STREET ADDRESS  CTIANT IT 24007	ECTORS IN 12
Standard Typed or printed name of registered agent and title if applicable (NOTE Registeringent signature required whon reinstating)  12. OFFICERS AND DIRECTORS  13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  THEE D  MANDEL, DOLORES M  1.2 IE  STREET ADDRESS  3724 S.E. FAIRWAY EAST  1.3 SET ADDRESS  CTIANT IN 24007	ECTORS IN 12
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THEE D DELETE 1.15  NAME MANDEL, DOLORES M 1.21E  STREET ADDRESS 7724 S.E. FAIRWAY EAST 13 SET ADDRESS 1.3 SET ADDRESS	Change Addition
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STREET ADDRESS 3724 S.E. FAIRWAY EAST 2.3 SET ADDRESS	
City: S1-ZiP   STUART FL 34997   2.4 (-S1-ZiP	Addition
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TITLE DELETÉ 6.1 TI	Loughlige D Manual
NAME 6.2 NA	
STREET ANDRESS	
SIREET ADDRESS  CITY-S1-7/P  14. I do hereby certify that the information supplied with this filing does not qualify for the imption stated in Section 119.07(3)(i), Florida Statutes, I further or mption stated in Section 119.07(3)(i), Florida Statutes, I further or mption stated in Section 119.07(3)(ii), Florida Statutes, I further or mption stated in Section 119.07(3)(ii), Florida Statutes, I further or mption stated in Section 119.07(3)(ii), Florida Statutes, I further or mption stated in Section 119.07(3)(ii), Florida Statutes, I further or mption stated in Section 119.07(3)(ii), Florida Statutes, I further or mption stated in Section 119.07(3)(ii), Florida Statutes, I further or mption stated in Section 119.07(3)(ii), Florida Statutes, I further or mption stated in Section 119.07(3)(ii), Florida Statutes, I further or mption stated in Section 119.07(3)(ii), Florida Statutes, I further or mption stated in Section 119.07(3)(ii), Florida Statutes, I further or mption stated in Section 119.07(3)(ii), Florida Statutes, I further or mption stated in Section 119.07(3)(ii), Florida Statutes, I further or mption stated in Section 119.07(3)(ii), Florida Statutes, I further or mption stated in Section 119.07(3)(ii), Florida Statutes, I further or mption stated in Section 119.07(3)(ii), Florida Statutes, I further or mption stated in Section 119.07(3)(ii), Florida Statutes, I further or mption stated in Section 119.07(3)(ii), Florida Statutes, I further or mption stated in Section 119.07(3)(ii), Florida Statutes, I further or mption stated in Section 119.07(3)(ii), Florida Statutes, I further or mption stated in Section 119.07(3)(ii), Florida Statutes, I further or mption stated in Section 119.07(3)(ii), Florida Statutes, I further or mption stated in Section 119.07(3)(ii), Florida Statutes, I further or mption stated in Section 119.07(3)(ii), Florida Statutes, I further or mption stated in Section 119.07(3)(ii), Florida Statutes, I further or mption stated in Section I further or mption stated in Section I further or	

rate and that my signature shall have the same legal effect as if made under outer this report as required by Chapter 807, Florida Statutes; and that my name Information indicated on this annual report or supplemental annual report is true and a Laman officer or director of the corporation or the receiver or trustee empowered to eappears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

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