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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P95000088319**1. Corporation Name

Principal Place of Business

RESOURCE COMPUTERS OF N.Y., INC.

9010 SW 137TH AVE., STE. 210 MIAMI FL 33186		9010 SW 137TH AVE., STE. 210 MIAMI FL 33186			DO NOT WRITE IN THIS SPACE		
					Date Incorporated or Qualifed 11/13/1995		
2. Principal Pl.	ace of Business	2a. Mailing Address			4. FEI Number Applied Fo	ır	
21		26			65-0619949 Not Applica		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	al	
City & State		City & State			6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees		
Zip 24	Country	Zip Cour 29 30		/	8. This corporation owes the current year Intangible Personal Property Tax.		
24	9. Name and Address of Current		<u> </u>	-	10. Name and Address of New Registered Agent		
	D. Hallio and Hadrons or garden		81	Name			
PEDROSO, MARIA I			82	Stroot A	Address (P.O. Box Number is Not Acceptable)	-+	
143 21 SW 88 ST.; # F 405			62	146	512 SU/ 139 AVE W		
MIAMI-FL 39186			83			1	
		٠.	84	City	IAMI FL FL 85 ZID Code	$\overline{\zeta}$	
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 Slansture, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when retinstating) DATE							
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	2	
TITLE	P	☐ DELETE	1.1 TITLE		Change Ac	ddition	
NAME (LAUFER, ROBERTO		1.2 NAME	Í	5660 110) 25 TASTOFET-#114	ſ	
STREET ADDRESS	9010 SW 137TH AVE		1.3 STREE	TADDRESS	TO (0 NO ST (2) /)		
CITY-ST-ZIP	MIAMI-FL 33186~		1.4 CITY-	ST-ZIP	7640 NW 25 th STREET #114 MIAMI FL 33/22	4 4141	
ππLE	T	☐ DELETE .	2.1 TITLE	ļ		Jaiuon	
NAME	KRELING PEDROSO, MARIA I		2.2 NAME	İ	INSID CIVI IZA ANE IN		
STREET ADDRESS	14321-SW-88-ST-#405		2.3 STREE	T ADDRESS	145/2 CW 139 AUE W MIAM/ 1-L 38/86		
CITY-ST-ZIP	MIAMI FL 33186	·	2. 4 CITY-	ST-ZIP	Change A	ddition	
TITLE		☐ DELETE	3.1 TITLE		Charge : A	Julion	
NAME (3.2 NAME	1			
STREET ADDRESS	. 4			TADDRESS	به صحف نبوی است داری است داری در این داری ا	,*	
CITY-ST-ZIP		∏ DELETE	3.4. CITY-	ST-ZIP	☐ Change ☐ Ar	ddition	
TITLE (•	- Dereie	4.1 TITLE 4. 2 NAME				
NAME				ET ADDRESS		}	
STREET ADDRESS	:		4.4 CITY-1	J	•	}	
CITY-ST-ZIP		☐ DELETE	5.1 TITLE	31-51	☐ Change ☐ A	ddition	
NAME			5.2 NAME				
STREET ADDRESS		·	5.3 STREE	T ADDRESS		Ì	
CITY+ST-ZIP			5.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change A	ddition	
NAME			6.2 NAME	Ì		1	
STREET ADDRESS	·		6.3 STRE	ET ADDRESS			

6.4 CITY-ST-ZIP

CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption staindicated on this annual report or supplemental annual report is true and accurate and that myle officer or director of the corporation or the receiver or trustee empowered to execute this report Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empoyer

nted in Section 1.19:07(3)(i), Florida Statutes. I further certify that the information tignature shall have the same legal effect as if made under oath; that I am an as required by Chapter 807, Florida Statutes; and that my name appears in

FILED Mar 24, 1999 8:00 am Secretary of State

03-24-1999 90019 050 ***150.00