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

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # P95000036572 (2)

WELLINGTON COMPUTER SOLUTIONS, INC.

Principal Place of				100 104 310 1610 61111 60111 18111 00111 00110	
		Maling Address			
11924 FOREST HILL BOULEVARD STE 22-198 11924 FOREST HILL BOULEVA					
WEST PALM BEACH FL 33414		MESI FALM DENOTITE SOFTY		3. Date Incorporated or Qualified 3a. Date	ate of Last Report
				05/05/1995	
	of Decineer	2a. Mailing Address		4, FEI Number	Applied For
. Principal Place) Or Business	26		65-0582287	Not Applicable
Suite, Apt. #, i	etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
		27		6. Election Campaign Financing	\$5.00 May Be
City & State		City & State		Trust Fund Contribution	Added to Fees
<u> </u>	Country	28 Zip	Country	8. This corporation has liability for intangible	e tax under s 199 032,
Zip I	25	29	30	Horida Statutes Yes No	
L	g. Name and Address of Curren	nt Registered Agent		10. Name and Address of New Register	ad Maent
			81 Name		
WEINSTE	in, seth t		82 Street Ad	ddress (P.O. Box Number is Not Acceptable)	
SOKOLOF	F & WEINSTEIN, P.A. ATTOR	NEYS	83		
11440 OK	KEECHOBEE BOULEVARD STE	: 215			85 Zip Code
	ALM BEACH FL 33411		84 City	poration submits this statement for the purpose of xiard of directors. Thereby accept the appointmen	F L T
NAME OF STREET	agent, or both, in the State of Fioli- and accept the obligations of, Sec			pared when reconstructing CA	
	gnature, typed or printed name of registere Lagran	4D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
IILE	0	☐ DELETE	1 1 TITLE		Change Addition
NAME	MUNIZ, JOSE E		1.2 NAME		
STREET ADDRESS	13993 VERONICA COURT		1.3 STREET ADDRESS		
CITY - ST - ZIP	WEST PALM BEACH FL 334	114	14 CITY - Si - ZIP		Change Addition
	D	DELETE	2 1 TITLE		Change Addition
TITLE NAME	D IRISH, MICHAEL P	F14 □ DELETE			☐ Change ☐ Addition
TITLE NAME STREET ADDRESS	D IRISH, MICHAEL P 2468 STONEGATE DRIVE	☐ DETEI€	2 1 TILLE 2 2 NAME		-
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SIGNATURE:

MATURE AND THE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/28/96 (407) 389-3498