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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State :: **DIVISION OF CORPORATIONS**

DOCUMENT #

(5)

COMPUTER RESEARCH & CONSULTING, INC.

FILED Apr 14 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						E KRAMANIA ULI BINDA ULUI MANIL BINDA I I	DAN BITCH DIBL	UTU\$1 1101 U1	411 01011 1001
3897 CROWN SUITE 1 JACKSONVIU	I POINT COURT LE FL 32257	SUITE 1	3697 CROWN POINT COURT SUITE 1 JACKSONVILLE FL 32257 US			DO NOT WRITE	IN THIS S	SPACE	
US		US				3. Date Incorporated or Qualified 04/03/1991			
2. Principal Pl	ace of Business	2a. Mailing Address	a. Mailing Address			4. FEI Number Applied For			pplied For
21		26	6			59-3056779			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	7			5. Certificate of Status Desired			Additional equired
City & State	9	City & State	8			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip				Country 8. This corporation owes or has paid the current year Intangible					
24	25 29 30			Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent					
	9. Name and Address of Currer	nt Registered Agent	B1	Nama	10. Name and Address of New Ko	igistered /	tgent		
CAMACHO, CIRO R.					81 Name				
2276 HAMMOCK OAKS DR N JACKSONVILLE FL 32223					Street Addres	eet Address (P.O. Box Number is Not Acceptable)			
				63					
			Ī	84	City		FL	85 Zip	Code
11 Pursuant	to the provisions of Sections 607 056	2 and 607 1508 Florida Statute	s the ab	nve-r	named corpo	ration submits this statement for the	ourpose of	changino	its registered
office or ri	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change was a	uthorized	1 by ti	he corporatio	n's board of directors. I hereby acce	pt the app	ointment as	s registered
SIGNATURE		arote	6-14-13		-1	J when reinstating)	DATE		
12.	Signature, typed or printed name of registered ag OFFICERS AN	ID DIRECTORS	13.	Agein	signature required	ADDITIONS/CHANGES TO OFFI		DIRECTO	RS IN 12
TITLE	PTD	☐ DELETE			T			Change	Addition
NAME	CAMACHO, CIRO R.		1.2 NA	ME					[:
STREET ADDRESS	2276 HAMMOCK OAKS DR N			1.3 STREET ADDRESS					
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CIT	Y-ST-	ZIP				ļ
TITLE	VSD	DELETE	2.1 TIT	LE	1			Change	Addition (
NAME	CAMACHO, RITA C		2.2 NAME						
STREET ADDRESS	2276 HAMMOCK OAKS DRI	VE N	2.3 ST	2.3 STREET ADDRESS		• •	. *		
CITY-S1-ZIP	Jacksonville FL		2.4 Cf	TY-ST-	- ZIP				
TITLE		☐ DELETE		3.1 TITLE				☐ Change	☐ Addition
NAME	32		3.2 NA	ME					
STREET ADDRESS			3.3 STI	REET AL	DORESS				
CITY-ST-ZIP			3.4. CI	TY-ST-	ZIP				
TITLE		☐ DELETE	4.1 TITL					☐ Change	Addition
NAME			4. 2 N	ME					
STREET ADDRESS			4.3 STI	REET A	DDRESS				
CITY-ST-ZIP			_	IY-ST-	ZIP			110	- I addition
TITLE		☐ DELETE	5.1 TIT		-			☐ Change	Addition
NAME			5.2 NA						
STREET ADDRESS					DORESS				
CITY-ST-ZIP		T DELETE		Y-\$1-	ZIP			Chance	Addition
TITLE		☐ DELETE	6.1 TIT					☐ Change	Addition
NAME			6.2 NA						
STREET ADDRESS			6.3 ST	REET AL	DDRESS				1
CITY-ST-ZIP			6.4 CIT	TY-ST-		Continue 410 07/2/6) Elevido Protutos	I E . all. au · ·	att i shi at at	- Information

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 informatio 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.

3/9/98

904-262-4505