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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## **FILED** Mar 29, 1999 8:00 am Secretary of State

03-29-1999 90025 035 \*\*\*158.75

## DOCUMENT # S96762 1. Corporation Name

ALLPLUS COMPUTER SYSTEMS CORP.

	•			,				
Principal Place of Business Mailing Address						g in Brini il i fille Bill; innté airin il ar arais ar	IREI MINIF AZOLI N	1011 01911 1001
2936 NW 72ND	2936 NW 72ND AVE	PND AVE						
MIAMI FL 33122 MIAMI FL 3312							00.05	
US		US	<b>\$</b>			DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed		]
	·	1 A 19 A 1				11/26/1991 4. FEI Number		
<u> </u>	lace of Business	2a. Mailing Address				1	· · ·	plied For t Applicable
21	И	26 Suite Apt # etc				65-0297379	\$8.75 A	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	<del>_</del>			5. Certifcate of Status Desired	Fee Re	I
City & State		City & State			6. Election Campaign Financing	\$5.00	<del></del>	
_		28				Trust Fund Contribution	Added to	
Zip	Country	Zip	Coun	trv		8. This corporation owes the current year Interest.		
24	25	29	30	•		Personal Property Tax.	Yes	χNο
24	9. Name and Address of Current	, I I	<del>55</del> 1			10. Name and Address of New Registered		/-
			1	B1 N	lame			
ALBI	erto marcolino Jeronimo Ri	odriguez	١,			(D.O. Boy Number in Not Assentable)		
2936 NW 72ND AVE				82 S	treet Addres	et Address (P.O. Box Number is Not Acceptable)		
MIAI	MI FL 33122		1	B3				
			ļ.,				Tarl 7:- (	
			1	B4 C	City	FL	85 Zip C	-oge
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	es, the abo	ove-na	amed corpor	ration submits this statement for the purpose of	changing its	registered
' office or r	egistered agent, or both, in the State on familiar with, and accept the obligation	of Florida. Such change was at	ithorized I	bv the	corporation	's board of directors. I hereby accept the appoin	ntment as reg	gistered
	in lamiliar with, and accept the obligation	ions di, decaon dor .oodo, rion	ioa Giaioi	.03.				ļ
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered A	gent sig	nature required v	when reinstating) DATE		
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	PS	☐ DELETE	1.1 TITL	E			Change	☐ Addition
NAME	RODRIGUEZ, JOSE JERONIMO		1.2 NAM	Æ			•	
STREET ADORESS	7925 NW 12 STREET, STE 324		1.3 STR	EET ADI	DRESS			1
CITY-ST-ZIP	MIAMI FL 33126		1.4 CITY	<u>(-</u> \$T-ŽIF	P			
TITLE	T	☐ DELETE	2.1 TITL	E			Change	Addition
NAME	RODRIGUEZ, ALBERTO M.J.	UEZ, ALBERTO M.J.		2.2 NAME				1
STREET ADDRESS	7925 NW 12 STREET		2.3 STR	2.3 STREET ADDRESS				j
CITY-ST-ZIP	MIAMI FL 33126		2. 4 CIT	Y-ST-Z	P			
TITLE	S □ DELETE 3.1T		3.1 TTL	E			Change	- Addition
NAME	EDUARDO, RODRIGUEZ J	RODRIGUEZ J 3.2		<b>KE</b>	1			
STREET ADDRESS	2936 NW 72ND AVE		3.3 STR	EET ADI	DRESS			ļ.
CITY-ST-ZIP	MIAMI FL 33122		3.4. CIT	Y-ST-ZI	P			
TITLE	VP	☐ DELETÉ	4,1 TITL	E			Change	☐ Addition
NAME	GONZALEZ, JAVIER		4.2 NA	ME				
STREET ADDRESS	7764 W 14TH CT		4.3 STR	EET ADI	DRESS		:	
CITY-ST-ZIP	HIALEAH FL 33014		4.4 CITY	Y-ST-ZII	Р			
TITLE	•	☐ DELETE	5.1 TITL				Change	☐ Addition (
NAME			5.2 NAM					[
STREET ADDRESS				EET ADI		÷		}
CITY-ST-ZIP				Y-ST-ZII	P			
TITLE		☐ DELETÉ	6.1 TITL				Change	Addition
NAME			6.2 NAM		1			
CTDEET ADDDEES	1		■ 63 STD	ECT AIN	DRESS			<b>I</b>

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 supplementation 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 chapted, of on an appachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

**SIGNATURE:**