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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 634414

(7)

Mailing Address

TURNKEY MINI-COMPUTER SYSTEMS, INC.

FILED May 12 1997 8:00am Secretary of State



	7	600 S.W. 75 TERRAC PLANTATION FL 333			
				3. Date Incorporated or Qualified 08/30/1979	3a. Date of Last Report 05/01/1996
2. Principal Place of	Business	2a. Mailing Address		4. FEI Number	Applied Fo
21		26		59-1935143	Not Applic
Suite, Apt #, etc		Suite, Apt. #, etc		5. Certificate of Status Desired	\$8.75 Addition Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Ζφ 24	Country 25	Zip 29	Country 30		Yes 🗌 No
		urrent Registered Agent		10. Name and Address of New Re	glatered Agent
PINCU, D			81 Name		
	75TH TERRACE ON FL 33317			ddress (P.O. Box Number is Not Acceptab	le)
			83		
			84 City		FL 85 Zip Code
11. Pursuant to the	provisions of Sections 60:	7.0502 and 607.1508, Florida S	Statutes, the above-named o	orporation submits this statement for the p	urpose of changing its regist
agent. Lam fam	reo agent, or both, in the iliar with, and accept the	obligations of, Section 607.050	was authorized by the corpo 5. Florida Statutes.	orporation's board of directors. I hereby accep	at the appointment as register
SIGNATURE					
	e typed or p∉nted name of register	red agent and title if applicable.	(NOTE: Registered Agent signature re	equired when reinstating)	DATE
12.	OFFICER	S AND DIRECTORS	13,	ADDITIONS/CHANGES TO OFFIC	
ппье ОР		☐ DELET	E 1.1 TITLE		☐ Change ☐ Ad
TAKE .	ALL BARDEL A				
	CU, DANIEL S.		1.2 NAME		
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1. I do 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 informal or undicated 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.

SIGNATURE

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-16-97 954-792-4

Daylime Phone #