

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 856400

1. Corporation Name

PROSPECTIVE COMPUTER ANALYSTS INCORPORATED

Principal Place of Business

Mailing Address

3. Date Incorporated or Qualified

05/10/83

3a. Date of Last Report

05/01/95

2. Principal Place of Business

2a. Mailing Address

21 400 Garden City Plaza

26 400 Garden City Plaza

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 301

27 Suite 301

City & State

City & State

23 Garden City, NY

28 Garden City, NY

Zip

Country

Zip

Country

24 11530

25

29 11530

30

4. FEI Number

11-2365052

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

XL Corporate Services, Inc.
216 West College Ave.
Tallahassee, FL 32302

81 Name J.V.O. Weaver

82 Street Address (P.O. Box Number is Not Acceptable)

243 Windward Way, Bluewater Bay

83

84 City Niceville

FL

85

Zip Code 32578

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 agree to the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of registered agent or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent's signature required when resigning.)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P D
NAME Wenger, Edward
STREET ADDRESS Forest Drive
CITY- ST- ZIP Sands Point, NY 11050

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NAME
STREET ADDRESS
CITY- ST- ZIP

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CITY- ST- ZIP

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP

300001748813
-03/19/96- 01048--010
***200.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Edward Wenger

3/13/96

(516) 742-9100

15 3-18-96

CR2E034 (12/95)