

11/18/97

1. Entity Name

FILED
- SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 MAR 20 PM 1:07

2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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6. Name and Address of Current Registered Agent	
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CORPORATION SERVICE COMPANY	Street Address
1201 HAYS STREET	
TALLAHASSEE FL 32301-2525	

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

9. Capital Contributions as Shown on record.	\$0.00	10. Amount of Capital Contributions in FLORIDA to date.	0.00	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12.	GENERAL PARTNER INFORMATION	13.	ADDRESS CHANGES ONLY
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DOCUMENT #	F99000004186	STREET ADDRESS	
NAME	DELL CATALOG SALES CORPORATION		
STREET ADDRESS	ONE DELL WAY		
CITY - ST - ZIP	ROUND ROCK TX 78682	CITY - ST - ZIP	

DOCUMENT #		STREET ADDRESS	500003189005--1
NAME			-03/29/001-01076--007
STREET ADDRESS			東京東京141.25 東京東京141.25
CITY - ST - ZIP		CITY - ST - ZIP	

DOCUMENT #		STREET ADDRESS	
NAME			
STREET ADDRESS		CITY - ST - ZIP	
CITY - ST - ZIP			

DOCUMENT #		STREET ADDRESS	
NAME			
STREET ADDRESS			
CITY, ST - ZIP		CITY - ST - ZIP	

DOCUMENT #		STREET ADDRESS	
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CITY - ST - ZIP			

DOCUMENT #		STREET ADDRESS	
NAME			
STREET ADDRESS			
CITY - ST - ZIP		CITY - ST - ZIP	

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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: *R. Thomas Armstrong* **SIGNATURE REQUIRED** R. Thomas Armstrong 3/14/00 512-728-1795
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER For Dell Catalog Sales Date 3/14/00 Daytime Phone # 512-728-1795

CR2E003 (9/99)