FILED

Mar 29, 1999 8:00 am Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F13768

1. Corporation Name

COMMERCIAL COMPUTERS, INC.

Principal Place	e of Business	Mailing Address)	ALT BIBNI SBAL
7875 N.W. 12 STREET 7875 N.W. 12 STREET						ļ		
#120 #120						DO NOT WRITE I	N THIS SPACE	
MIAMI FL 33126 MIAMI FL 33126						3. Date Incorporated or Qualifed	N THIS SPACE	
						12/24/1980		
2 Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number	App	lied For
21 26						59-2055362	Not	Applicable
Suite, Apt.	Suite, Apt. #, etc.	Suite, Apt. #, etc.				\$8.75 A		
22	27				5. Certificate of Status Desired	Fee Rec	quired	
City & State	City & State	City & State		6. Election Campaign Financing	\$5.00			
23		28				Trust Fund Contribution	Added to	Fees
Zip	Country	Zip	,	untry		8. This corporation owes the current]
24	25	29	30			Personal Property Tax.		□No
	9. Name and Address of Currer	it Registered Agent		81	Name	10. Name and Address of New Regi	stered Agent	
MATE 1	ENGLY HADVEY			["]	Name			
WILLENSKY, HARVEY 7 N HIBISCUS DR.				82 Street Address (P.O. Box Number is Not Acceptable)				
	AII BEACH FL 33139			83				
MIN	III DEACH FE 33139			03				
				84	City		FL 85 Zip C	ode
		0 1007 4500 Florido Over				antian aubuits this statement for the pur		registered
office or re	egistered agent, or both, in the State	of Florida. Such change was a	uthorize	ed by i	the corporati	poration submits this statement for the pur ion's board of directors. I hereby accept the	e appointment as reg	istered
agent. I a	m familiar with, and accept the obliga	itions of, Section 607.0505, Flo	rida Sta	tutes.				
SIGNATURE	HARVEY WILLEN	15KY	e ne ne ce			ed when reinstating)	-12-99	\
12.	Signature, typed or printed name of registered age	ID DIRECTORS	13	<u> </u>	r signature reduir	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTOR	RS IN 12
TITLE	p ·	DELETE	_	TILE			☐ Change	☐ Addition
NAME	WILLENSKY, HARVEY		1.21	NAME				
STREET ADDRESS	7875 N.W. 12 STREET		1.3 3	STREET	ADORESS			
CITY-ST-ZIP	MIAMI FL 33126			CITY-S1	1			ļ
TITLE				TTLE			☐ Change	☐ Addition
NAME			2.2	NAME		•		
STREET ADDRESS	7875 N.W. 12 STREET		2.3	STREET	ADDRESS			1
CITY-ST-ZIP	MIAMI FL 33126	the second of	÷ 2.4	CITY-S	T-ZIP	and the second second	·	
TITLE			3.1	τπιΕ			☐ Change	☐ Addition {
NAME			3.2	NAME				-
STREET ADDRESS			3.3	STREET	ADDRESS			}
CITY-ST-ZIP			3.4.	CITY-S	T-ZIP			
TITLE		☐ DELETE	4.1	TITLE			☐ Change	☐ Addition
NAME			4.2	NAME				
STREET ADORESS.			4.3	STREET	ADDRESS			
CITY-ST-ZIP	•		4.4	CITY-S1	r-ziP	.		
TITLE		DELETE		TTLE			☐ Change	· Addition
NAME			1	NAME				
STREET ADDRESS			5.3	STREET	ADDRESS			
CITY-ST-ZIP				CITY-S	T-ZIP			
TITLE		☐ DELETE		TITLE	-		☐ Change	☐ Addition
NAME				NAME				
	\$ 50 S S S S S		63	STREET	ANDRESS			1

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 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 changes, on an attachment with an apprecia, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP