

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
Apr 28 1997 8:00am
Secretary of State

DOCUMENT # F93000000657 (7)

1. Corporation Name

COMPUTER LIQUIDATIONS, LTD., INC.



Principal Place of Business

6531 PARK OF COMMERCE BLVD
SUITE C-150
BOCA RATON FL 33487

Mailing Address

6531 PARK OF COMMERCE BLVD
SUITE C-150
BOCA RATON FL 33487-0297

2. Principal Place of Business

21 3700 Airport Road

Suite, Apt. #, etc.

22 304

City & State

23 Boca Raton, FL

Zip

24 33431

Country

25 US

2a. Mailing Address

26 3700 Airport Road

Suite, Apt. #, etc.

27 304

City & State

28 Boca Raton, FL

Zip

29 33431

Country

30 US

9. Name and Address of Current Registered Agent

ROSENBERG, ROBERT
6531 PARK OF COMMERCE BLVD
SUITE C-150
BOCA RATON FL 33487

3. Date Incorporated or Qualified

01/26/1993

3a. Date of Last Report

05/01/1996

4. FEI Number

16-1429180

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

10. Name and Address of New Registered Agent

81 Name

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

83 3700 Airport Road #304

84 City

Boca Raton

FL

85 Zip Code

33431

11. Pursuant to the provisions of Sections 607.0502 and 607.1908, 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 accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Robert L. Rosenberg

(NOTE: Registered Agent signature required when reinstating)

DATE

4/18/97

12. OFFICERS AND DIRECTORS

TITLE P
NAME ROSENBERG, ROBERT L
STREET ADDRESS 5188 SW 26 CIR.
CITY- ST- ZIP BOCA RATON FL
☐ DELETE

TITLE V
NAME DORAN, DAVID A
STREET ADDRESS 3699 MYKONOS CT
CITY- ST- ZIP BOCA RATON FL
☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Robert Rosenberg - P
1.2 NAME
1.3 STREET ADDRESS 5188 NW 26 Cir.
1.4 CITY- ST- ZIP Boca Raton, FL.
☒ Change ☐ Addition

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

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

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

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

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

14. 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 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: X

Robert L. Rosenberg

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0339278

CR2E034 (9/96)