

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 01, 1999 8:00 am  
Secretary of State

03-01-1999 90182 035 \*\*\*150.00

DOCUMENT # F93000002277

1. Corporation Name  
EQ COMPUTER PRODUCTS AND SERVICES, INC.

Principal Place of Business  
951 CLINT MOORE RD.  
BOCA RATON FL 33487

Mailing Address  
206 DANBURY RD.  
WILTON CT 06897



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/14/1993

4. FEI Number

06-1367245

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 owes the current year intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

81 Name

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

83

84 City

FL

85 Zip Code

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 accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE  
NAME PARKES, RICHARD  
STREET ADDRESS 799 NE 32 ST  
CITY-ST-ZIP BOCA RATON FL 33431

1.1 TITLE D ☐ Change ☒ Addition  
1.2 NAME GEORGE CHRISTIAN  
1.3 STREET ADDRESS 951 Clint Moore Rd  
1.4 CITY-ST-ZIP Boca Raton, FL 33487

TITLE S ☒ DELETE  
NAME DUNN, SCOTT  
STREET ADDRESS 206 DANBURY ROAD  
CITY-ST-ZIP WILTON CT 06897

2.1 TITLE T ☐ Change ☒ Addition  
2.2 NAME Jorge L. Rodriguez  
2.3 STREET ADDRESS 951 Clint Moore Rd  
2.4 CITY-ST-ZIP Boca Raton FL 33487

TITLE D ☒ DELETE  
NAME O'HALON, MICHAEL  
STREET ADDRESS 206 DANBURY RD.  
CITY-ST-ZIP WILTON CT 06897

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

TITLE D ☐ DELETE  
NAME MALLIN, JOEL  
STREET ADDRESS 110 EAST 59TH STREET  
CITY-ST-ZIP NEW YORK NY 10022

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

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED: Jorge L. Rodriguez 1/27/99 561241  
Date Daytime Phone # 5133

CR2E034 (11/98)