

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

FILED

Apr 24 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F95000000155 (0)**

1. Corporation Name

COMPAQ COMPUTER CORPORATION

Principal Place of Business

**20555 S. H. 249
HOUSTON TX 77070**

Mailing Address

**20555 S. H. 249
MC 110206
HOUSTON TX 77070
US**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 01/10/1995	3a. Date of Last Report 02/01/1996
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 76-0011617	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

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
				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 type-3 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	PCEO	<input type="checkbox"/> DELETE		1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	PFEIFFER, ECKHARD			1.2 NAME			
STREET ADDRESS	COMPAQ COMPUTER CORP/ 20555 S.H. 249			1.3 STREET ADDRESS			
CITY - ST - ZIP	HOUSTON TX 77269-2000			1.4 CITY - ST - ZIP			
TITLE	VGM	<input checked="" type="checkbox"/> DELETE		2.1 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	BARNES, HUGH			2.2 NAME	Rose, John T.		
STREET ADDRESS	COMPAQ COMPUTER CORP/ 20555 S.H. 249			2.3 STREET ADDRESS	Compaq Computer Corp./ 20555 S.H.249		
CITY - ST - ZIP	HOUSTON TX 77269-2000			2.4 CITY - ST - ZIP	Houston, TX 77070-2698		
TITLE	VGM	<input type="checkbox"/> DELETE		3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BARTH, ANDREAS			3.2 NAME			
STREET ADDRESS	COMPAQ COMPUTER CORP/ 20555 S.H. 249			3.3 STREET ADDRESS			
CITY - ST - ZIP	HOUSTON TX 77269-2000			3.4 CITY - ST - ZIP			
TITLE	V	<input checked="" type="checkbox"/> DELETE		4.1 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	COOLEY, ROSS			4.2 NAME	Snyder, Richard N.		
STREET ADDRESS	COMPAQ COMPUTER CORP/ 20555 S.H. 249			4.3 STREET ADDRESS	Compaq Computer Corporation/20555 SH 249		
CITY - ST - ZIP	HOUSTON TX 77269-2000			4.4 CITY - ST - ZIP	Houston, TX 77070-2698		
TITLE	VGCS	<input checked="" type="checkbox"/> DELETE		5.1 TITLE	VGCS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	FARGO, WILSON D			5.2 NAME	J. David Cabello		
STREET ADDRESS	COMPAQ COMPUTER CORP/ 20555 S.H. 249			5.3 STREET ADDRESS	Compaq Computer Corporation/20555 S.H. 249		
CITY - ST - ZIP	HOUSTON TX 77269-2000			5.4 CITY - ST - ZIP	Houston, TX 77070-2698		
TITLE	V	<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	GUTSCH, HANS W			6.2 NAME			
STREET ADDRESS	COMPAQ COMPUTER CORP/ 20555 S.H. 249			6.3 STREET ADDRESS			
CITY - ST - ZIP	HOUSTON TX 77269-2000			6.4 CITY - ST - ZIP			

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:  **SIGNATURE REQUIRED**

4/3/97

281-370-0670

Date

Daytime Phone #

0628135

CR2E034 (9/96)