## 2004 FOR PROFIT CORPORATION

## Jul 06, 2004 8:00 am Secretary of State ANNUAL REPORT **DOCUMENT # F98000005465** 07-06-2004 90006 022 \*\*\*158.75 1. Entity Name ENCORE REAL TIME COMPUTING, INC. Principal Place of Business Mailing Address 54060011 1700 NW 66 AVENUE 1700 NW 66 AVENUE SHITE 103 **SUITE 103** FORT LAUDERDALE, FL 33313 FORT LAUDERDALE, FL 33313 US 2. Principal Place of Business 3. Mailing Address 305 EAST DRIVE 805 EAST DRIVE Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/03) 06302004 Chg-P SUITE A Applied For City & State City & State 4. FEI Number TELBOURNE MELBOURNE 51-0381481 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WILKINSON, RICK Street Address (P.O. Box Number is Not Acceptable) 105 EAST DRIVE MELBOURNE, FL 32904 Fi 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Due by September 8, 2004 Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE ☐ Delete TITLE Change Addition **BECK, CONSTANCE A** NAME NAME 105 EAST DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MELBOURNE, FL 32904 CITY-ST-ZIP Delete. Change ☐ Addition BECK, HAROLD D NAME NAME STREET ADDRESS 105 EAST DRIVE STREET ADDRESS CITY-ST-ZIP MELBOURNE, FL 32904 CITY-ST-ZIP Addition TITI F Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition MANAF NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. 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 or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. RICK WILKINSON, C.F.O. 11/04 SIGNATURE:

**FILED**