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

PROFIT Apr 17 1998 8:00am ELORIDA DEPARTMENT DE STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** (5)C & S COMPUTER SERVICE, INC. Principal Place of Business Mailing Address 15321 NW 60TH AVE. 15321 NW 60TH AVE MIAMI LAKES FL 33014 MIAMI LAKES FL 33014 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>11/02/1982</u> 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-2232701 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution П 28 Added to Fees Zip Country $Z_{\rm IP}$ Country 8. This corporation owes or has paid the current year Intangible 24 25 Personal Property Tax due June 30. Yes 30 g, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BAHRY, CHARLES 15321 NW 60TH AVE. Street Address (P.O. Box Number is Not Acceptable) MIAMI LAKES FL 33014 83 84 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) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. VD DELETE Change Addition TITLE 1.1 TITLE BAHRY, CHARLES NAME 1.2 NAME 15321 NW 60TH AVE. STREET ADDRESS 1.3 STREET ADDRESS MIAMI LAKES FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE ٧D 2.1 TITLE Change Addition NAME SOOY, GARRETT C 22 NAME 15321 NW 60TH AVE STREET ADDRESS 2.3 STREET ADDRESS MIAMI LAKES FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE 3.MT 3.1 TITLE Change Addition COCCHI, MARINO F NAME 3.2 NAME 15321 NW 60TH AVE. STREET ADDRESS 3.3 STREET ADDRESS MIAMI LAKES FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE ☐ Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE Change Addition 6.1 TITLE MAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** CITY-ST-ZIP 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.

FILED