| SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750). | | | | ALLUUYEU |
|--|--|------------------------------------|---------------------------------------|---|
| COR | PROFIT RPORATION JAL REPORT | Sandra B. | | AND |
| | 1998 | Secretary DIVISION OF CO | | 98 DEC -7 AM 9: 37 |
| - | MENT # G61856 | (2) | | SECRETARY OF STATE TALLAHASSEE, FLORIDA |
| | ETAILING, INC. | . , | | |
| | | | | |
| Principal Place of Business Mailing Address 2400 SOUTH MICROAGE WAY 2400 SOUTH MICROAGE V | | | | 1 104 (H) 05-14 2-1285 (1005-70-10) 05:10 011 11 11 11 11 11 11 11 11 11 11 11 |
| TEMPE AZ 85282-1896 | | TEMPE AZ 85282-1896 | | DO NOT INSTER IN THE COACE |
| US US | | | | DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified |
| Principal Place of Business | | | | 09/30/1983 4. FEI Number Applied For |
| 2. Principal P | nace of business | 2a. Mailing Address | | 4. FEI Number Applied For S9-2331763 Not Applicable |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 5. Certificate of Status Desired S8.75 Additional Fee Required |
| City & Stat | re | City & State | | 6. Election Campaign Financing \$5.00 May Be |
| Zip | Country | Zip Zip | Country | Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible |
| 24 - | 25 | 293 | 80 | Personal Property Tax due June 30. Yes No |
| 7.7 | 9. Name and Address of Current I CORPORATION SYSTEM | Registered Agent | 81 Name | 10. Name and Address of New Registered Agent |
| - 1200 SOUTH PINE ISLAND ROAD | | | | Address (P.O. Box Number is Not Acceptable) |
| PLANTATION FL 33324 | | | | national (F.O. DOX Number to Not Acceptable) |
| i | | | 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. | | | | |
| agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes. SIGNATURE | | | | |
| 12. | Signature, typed or printed name of registered agent a OFFICERS AND | | Registered Agent signatu | e required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE | CD | DELETE | 1.1 TITLE | ADDITIONS CHANGES TO OFFICERS AND DIRECTIONS IN 12 |
| NAME | MCKEEVER, JEFFREY D | _ | 1.2 NAME | -12/09/3801098018 |
| STREET ADDRESS | 2400 SOUTH MICROAGE WAY TEMPE AZ 85282-1896 | | 1.3 STREET ADDRESS | ****550.88 ****550.00 |
| CITY-ST-ZIP TITLE | SD | ☑ DELETE | 1.4 CITY-ST-ZIP 2.1 TITLE | CEO Change Addition |
| NAME | LEWIS, JOHN S | | 2.2 NAME | Robert O'Malley, |
| STREET ADDRESS CITY-ST-ZIP | 2400 SOUTH MICROAGE WAY TEMPE AZ 85282-1896 | | 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP | 2400 South MIcroAge Way = |
| TITLE | P | X DELETE | 3.1 TITLE | P XX Change Addition |
| NAME | SWANSON, JEFFREY M 2400 SOUTH MICROAGE WAY | | 3.2 NAME | Chris Koziol 2400 South MicroAge Way |
| STREET ADORESS CITY-ST-ZIP | TEMPE AZ 85282-1896 | | 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP | Tempe, Arizona 85282-1896 |
| TITLE | T | DELETE | 4,1 TITLE | Change Addition |
| NAME | DANIEL, JAMES R 2400 SOUTH MICROAGE WAY | | 4.2 NAME | |
| STREET ADORESS CITY-ST-ZIP | TEMPE AZ 85282-1896 | | 4.4 CITY-ST-ZIP | |
| TITLE | V | X DELETE | 5.1 TITLE | V X Change Addition |
| NAME | LYONS, ALAN R 2400 SOUTH MICROAGE WAY | | 5.2 NAME | James H. Domaz |
| STREET ADDRESS CITY-ST-ZIP | TEMPE AZ 85282-1896 | | 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP | 2400 South MicroAge Way |
| TITLE | V | X DELETE | 6.1 TITLE | Tempe, Arizona 85282-1896 Change Addition |
| NAME | FURSE, LINDA C | • | 6.2 NAME | \ \ \ \ \ \ \ \ \ \ |
| STREET ADDRESS CITY-ST-ZIP | 2400 SOUTH MICROAGE WAY TEMPE AZ 85282-1896 | | 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP | 12/9 |
| 14. I hereby ce | artify that the information supplied with th | is filing does not qualify for the | exemption stated in | section 119.07(3)(i), Florida Statutes. I further certify that the information ture shall have the same legal effect as if made under path, that I am |
| 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 attaphment with an address. | | | | |
| and the state of t | | | | |

SIGNATURE:

SIGNATURE REQUIRED

8/21/98

602-366-2000

CR2E034 (5/98)

Post Office Box 1920 Tempe, AZ 85280-1920 U.S.A. 2400 South MicroAge Way Tempe, AZ 85282-1896 U.S.A. (602) 804-2000 FAX (602) 966-7339



CERTIFIED MAIL
RETURN RECEIPT REQUESTED

December 2, 1998

Division of Corporations Annual Report/Reinstatement Section P. O. Box 6327 Tallahassee, FL 32314-6327

Re: #G61856 - Microretailing, Inc.

Gentlemen:

With further regard to my letter dated 11/16/98, a copy of which is enclosed, the report that was sent to you in August was just returned by the post office marked "Returned for Postage."

I called your office today, and they stated that they because of this fact, I would not have to reinstate our corporation.

Enclosed is the report and check in the amount of \$550.00. If you have any questions, please call me at 602-366-2320.

Very truly yours,

MICRORETAILING, INC.

Elaine D. Tersini

Paralegal Executive Assistant

enc