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

DOCUMENT # G99299

SYSTEM	ATIC COMPUTER PRODUC	TS, II	NC.								
Principal Place of Business Mailing Address) 9 1911 81911 91		
13306 SW 128 STREET 13306 SW 128 STREET											
MIAMI FL 33186 MIAMI FL 33186								DO NOT WRITE IN THIS SPACE			
								3. Date Incorporated or Qualifed	PACE		
								03/06/1984			
2. Principal P	lace of Business	2a	. Mailing Address					4. FEI Number	Apr	olied For	
1			26					59-2375117	Not	Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75 A		
22		27	_					5. Certificate of Status Desired	Fee Rec	quired	
City & Stat	e		City & State					6. Election Campaign Financing	\$5.00	May Be	
23		28						Trust Fund Contribution	Added to	Fees	
Zip	Country		Zip		Country	¥		8. This corporation owes the current year Intar		_	
24	25	29		30				Toronal Topolty Tax		□No ·	
	ıt Regi	stered Agent					10. Name and Address of New Registered A	gent			
	T1400 EERNANDO I				81	Name	!				
SANTIAGO, FERNANDO L.					82	82 Street A		ess (P.O. Box Number is Not Acceptable)			
12935 SW 116TH ST.					-			proceeding in the property of the section of the se	404 × 475 5	ووهدوان والمو	
MIAMI FL 33186					83	3		(1) 1 (1) (1) (1) (1) (1) (1) (1) (1) (1	排, 野門	(1) (1-7-1) (6-3) (1-7-1) (1-7-1) (1-7-1) (1-7-1)	
						014			85 Zip C	6 , \$13 1 :: 55-	
					84	City		FL	85 Zip C	,00 0	
· office or r	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the obligations are secured.	of Flor	ida. Such change was a f, Section 607.0505, Flo	autno orida	nzed by Statutes	the cor s.	ooratio	pration submits this statement for the purpose of cl n's board of directors. I hereby accept the appoint	nanging its i	registered gistered	
0,0,0,0,0	Signature, typed or printed name of registered age			E: Regi	stered Age	nt signature	required	when reinstating) DATE			
12.	OFFICERS AN	ID DIR		-	13.		,	ADDITIONS/CHANGES TO OFFICERS AND			
TITLE	P		☐ DELETE		1.1 TITLE				Change	☐ Addition	
NAME	SANTIAGO, FERNANDO L.			ŀ	1.2 NAME						
STREET ADDRESS	12935 S.W. 116TH STREET			ı	1.3 STREE	T ADDRES	3				
CITY-ST-ZIP	MIAMI FL				1.4 CITY-5	ST-ZIP					
TITLE	V		☐ DELETE		2.1 TITLE				Change	Addition	
NAME	SANTIAGO, MARLING				2.2 NAME						
STREET ADDRESS	12935 S.W. 116TH STREET				2.3 STREE	T ADDRES	\$	<u> </u>			
CITY-ST-ZIP	MIAMI FL				2. 4 CITY-	ST-ZIP					
TITLE	,		☐ DELETE		3.1 TITLE				Change	☐ Addition	
NAME	1 € 1				3.2 NAME			•			
STREET ADDRESS				1	3.3 STREE	T ADDRES	3	人名英格兰人姓氏 医克尔氏 医基础定用 电	ange y grit n	G., 3-81-1631	
CITY-ST-ZIP	in the control of the				3.4. CITY-			· · · · · · · · · · · · · · · · · · ·			
TITLE			☐ DELETE	_	4.1 TITLE			三、人物、建筑、大型、建筑等型、建筑、	Change:	Addition	
, NAME					4, 2 NAME		-				
STREET ADDRESS	· ·					T ADORES	3				
					4.4 CITY - 5						
CITY-ST-ZIP			□ DELETE	┰╂	51 TITLE		+		Change	Addition	

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.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

FILED

Feb 10, 1999 8:00am

Secretary of State

02-10-1999 90026 020 ***158.75

Addition