## 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 # G99624 1. Corporation Name

PYGMY COMPUTER SYSTEMS, INC

	•								
Principal Place of Business ' Mailing Address								AR BABAN BABAN 1884	
12415 SW 136		12415 SW 136 AVE							
STE 3		STE 3							
MIAMI FL 33186 MIAMI FL 33186						DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed			
US US						03/13/1984			
- 50-1-1-0	1	2a. Mailing Address				4. FEI Number	$-\Gamma$	Applied For	
<u> </u>	lace of Business	2a, Mailing Address				59-2382639	<del></del>	Not Applicable	
Suite, Apt.	# etc	Suite, Apt. #, etc.				_		5 Additional	
22	#, etc. ;,	27				5. Certifcate of Status Desired	Fee	Required	
City & Stat	e	City & State			-	6. Election Campaign Financing	\$5.0	00 May Be	
23		28				Trust Fund Contribution Added to Fees			
Zip	Country	Zip	¬ ·			8. This corporation owes the current year Intangible			
24	25 29 30		30			Personal Property Tax.	☐ Yes	□No	
	Registered Agent	81 Name			10. Name and Address of New Registere	Agent			
SPITZER, MORRY W.				01	Name				
	5 SW 136 AVE	82 Stre		Street Ad	dress (P.O. Box Number is Not Acceptable)		ĺ		
STE	' '''		F	83					
	/II FL 33186		L						
THE USIF PER SECTION				84 City		F	85 Z	ip Code	
office or r	egistered agent, or both, in the State of imfamiliar with, and accept the obligation.  Signature, typed or printed name of registered agent	THORIGA: Such change was atons of, Section 607.0505, Florend title if applicable. (NOTE:	rida Statu	tes.	ine corpora	proporation submits this statement for the purpose ation's board of directors. I hereby accept the appulation when reinstating)  DATE  DAT		, registered	
12.	OFFICERS AND DIRECTORS  [] DELETE		_	13.		ADDITIONS/CHANGES TO OFFICERS	Chang		
TITLE			1.1 IIII 1.2 NAI				onen	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
NAME	GEIGEL, MARK T.	•			ADDRESS				
STREET ADDRESS	000 011 107 01				1				
CITY-ST-ZIP TITLE	TVD	C BELETE		1.4 CITY-ST-ZIP			Chang	ge Addition	
NAME	SPITZER, MORRY W.	<del>-</del> 1							
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP	MIAMI FL			Y-S1	T-ZIP	. <u></u>			
TITLE	.D	☐ DELETE	3.1 TITLE				Chan	ge Addition	
NAME	BENNETT, ANDREW L. JR.,		3.2 NAME						
STREET ADDRESS	7610 SW 64TH CT		3.3 STR		ADDRESS				
CITY-ST-ZIP	SOUTH MIAMI FL 33143			Y-\$1	T-ZIP				
TITLE	SD	☐ DELETE	4.1 TITLE				☐ Chan	ge	
NAME	OCHOA, ELIZABETH M.		4. 2 NAME						
STREET ADDRESS	6346 SW 136TH CT. #H202				ADDRESS				
CITY-ST-ZIP	MIAMI FL	The state	4.4 CITY-		r-ZIP		Chan	ge Addition	
TITLE		☐ DELETÉ	5.1 TITLE 5.2 NAME					geAddition	
NAME .					ADDRESS				
STREET ADDRESS	87		5.4 CIT						
CITY-ST-ZIP			6.1 TIT		,- Z.IF		☐ Chan	ge Addition	
TITLE C.S.		☐ pereie	6.2 NAME						
NAME	I .							<b>I</b>	

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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS

**FILED** 

Jan 23, 1999 8:00am

**Secretary of State** 

01-23-1999 90031 014 \*\*\*150.00