FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

H88512

(9)

FLORAL COMPUTER SYSTEMS, INC.

FLOF	RAL COMPUTER SYSTEM	S, INC							
Principal Place of Business Mailing Address						+ idental gidt iftigt tilles birdt einer sien dreit mant andre nien andre einen eine			
% J. D. RASH 8362 PINES BLVD #338 PEMBROKE PINES FL 33024		% J. D. RASH 8362 PINES BLVD #338 PEMBROKE PINES FL 33024							
					3. Date Incorporated or Qualified 11/27/1985 3a. Date of Last Report 04/18/1995				
2. Principal Place of Business		2a, Mailing Address				4. FEI Number 59-2803116		Applied For	
								Not Applicable	
Suite, Apt. #, etc		Suite	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required	
City & Sta	ate	27 Gity	& State			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
Zip	Country	Zip	30 Co	untry		This corporation has liability for in Florida Statutes Yes	ntangible	tax under s 199.032,	
:4	25	29		T		10. Name and Address of New Registered Agent			
9371	9. Name and Address of Cu DERSON, JOHN I SW 8TH STREET BROKE, PINES, FL 33025	rrent Hegisteret	3 Agen	81 82 83	Name Street Addr	ess (P.O. Box Number is Not Acceptab			
				84	City		F	85 Zip Code	

11. Pursuant to the provisions of Sections 607,0502 and 607,1508. Florida Statutes, the above-hamed 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.

2.	y at liet typed or princed have chiegothered agreed and the t OFFICERS AND DIREC	CTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TLE	PD	☐ DELETE	1 1 1/1/16	Change Addition
AME	HENDERSON, JOHN L., JR.		1.2 NAME	
TREET ADDRESS	8362 PINES BLVD, #338		1.3 STREET ADDRESS	
ITY - ST - ZIP	PEMBROKE PINES FL		14 CITY - S1 - ZIP	
ITLE		☐ DELETE	2 1 TITLE	Change Addition
AMÉ			2.2 NAME	
TREET ADDRESS			2.3 STREET ADDRESS	
CITY - S1 - ZIP			2.4 CIPY - ST. 7IP	
1115		☐ DELETE	3 1 TITLE	Change Addition
JAMÉ			3.2 NAME	
TREE! ADDRESS			3.3 STREET ADDRESS	
CITY - ST - ZIP			3.4 Cl1+ - ST - 7IP	
ITLE		DELE1E	4 1 TITLE	Change Addition
AME			4.2 NAME	
TREET ADDRESS			4 3 STHEET ADDRESS	
ITY - ST - ZIP			4.4 City - ST ZIP	
TLE		☐ DELETE	5 1 THE	Change Addition
IAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
ITY - ST - ZIP			5 4 Cilly - ST - ZIP	
ITLE		☐ DELETE	6 1 TITLE	Cnange Additio
NAME			62 NAMÉ	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CRY - ST - ZIF	for the exemption stated in Section 119.07(3)(k), Florida Statutes further

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes | 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

SIGNATURE: _

Signature and typed or printed name of signing officer or director.

The Landscape American Designation of the printed officer or director.

The Landscape American Designation of the printed officer or director.

4/20/96 (954)437-2421