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

PROFIT CORPORATION ANNUAL REPORT

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H95996

(5)

Mailing Address

ALTO COMPUTER SERVICES, INC.

FILED Apr 29 1997 8:00am Secretary of State

% THOMAS C. WALSER 7015 BERACASA WAY #201 BOCA RATON FL 33433		7015 BERA	% THOMAS C. WALSER 7015 BERAGASA WAY #201 BOCA RATON FL 33433-3449					ee i 15				
							;	 Date Incorporated or Q 01/24/1986 	tualified 3	 Date of Last F 08/05/1996 	eport	
2. Principal Place of Business		Fi *	2a. Mailing Address			-	FEt Number		————·	plied For		
21			26				59-2760661			ot Applicable		
Suite, Apt. #, etc.		27	······································				5. Certificate of Status De	sired	\$8.75 Additional Fee Required			
City & State		28				•	6. Election Campaign Financing Trust Fund Contribution Trust Fund Contribution Trust Fund Contribution Trust Fund Contribution					
Zip 4		Country 25	Zip 29	Zip Country 30			1	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
71		and Address of Curre		jent		<u> </u>	. 1	D. Name and Address of				
7019	SER, THO BERACAS A RATON	SA WAY #204 PLAZ	'A 2 STE. 204		81 82 83		Address	(P.O. Box Number is Not	Acceptable)			
					84	City	.,			FL 85 Zip	Code	
office or re agent. I as SIGNATURE	egistered ag m familiar wi	ont, or both, in the Stat th, and accept the obli	te of Florida Such gations of, Section	change was a 1 607.0505, Flo	authorized b orida Statute	y the corp s.	poration's	ion submits this statement board of directors. I here	t for the purpo by accept the	se of changing i appointment as	is registered registered	
	Signature, typed	or printed name of registered a		o. (NOT	i : Registered Ag	ent signature	required wt			ATE		
12. TITLE	DPT	OFFICERS A	ND DIRECTORS	DELETE	13.			ADDITIONS/CHANGES	10 OFFICERS	AND DIRECTOR	S IN 12	
NAME		, BARBARA M.		<i>occerc</i>	1.2 NAMÉ						L AUGINOI	
STREET ADDRESS		RACASA WAY #204				T ADDRESS						
CITY-ST-ZIP	BOCA R				1.4 CiTY-							
TITLE	AS			DELETE	21 UILE	o I - ZIF				☐ Change	Addition	
NAME		, THOMAS C.			2.2 NAME							
STREET ADDRESS		RACASA WAY #204			- 1	I ADDRESS						
CITY-ST-ZIP	BOCA R				2.4 CITY-							
TITLE				DELETE	3.1 TITLE			~ *************************************		Change	Addition	
NAME					3.2 NAME							
STREET ADDRESS					3.3 STREE	T ADDRESS						
CITY-ST-ZIP					3 4. CITY-	ST - ZIP						
TITLE				☐ DELF1E	4.1 TO LE					Change	Addition	
NAME					4. 2 NAME							
STREET ADDRESS					4.3 STREE	I ADDRESS						
CITY-ST-ZIP					4.4 CiTY-	ST-ZIP						
TITLE				DELETE	51 TITLE					Change	Addition	
NAME					5.2 NAME							
STREET ADDRESS					53 STREE	ADDRESS						
CITY-ST-ZIP					5.4 CITY-	S1 - ZIP	ļ					
TITLE				∐ DELETE	6.1 TITLE					☐ Change	Addition	
NAME					6.2 NAME							
STREET ADDRESS					6.3 STREE	1 ADDRESS						
CITY-ST-ZIP	,				6.4 City-		L					
informatio	n indicated (Nicer or dire	on this annual report or	r supplemental an	nual report is t	rue and acc	urate and	d that my	Section 119.07(3)(i), Florid signature shall have the s required by Chapter 607,	ame legal effe	ect as if made un	der oath; the	