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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # J10816

(3)

COMPUTER CD WAREHOUSE, INC.

FILED Jan 27 1997 8:00am Secretary of State



Principal Place of Business Mailing Address 7875 BIRD ROAD PO BOX 163539 9UTE 229 MIAMI FL 33116-3539 US				3. Date Incorporated or Qualified 3a. Date of Last Report 04/23/1986 02/08/1996			
2. Principal Place of Business	2a. Mailing Address			4, FEI Number	- Antanti		plied For
21	26			59-2674233	}		Applicable
Suile, Apt. #, etc. 22 SUITE 229	Suite, Apt #, etc.			5. Certificate of Status Desired			dditional
City & State 23	City & State			Election Campaign Financing Trust Fund Contribution		5.00 i	
Zip Country	Zip	Count	ry	8. This corporation has liability for	intangible tax u	nder s.	199.032
24 25	29	30			Yes No		
g. Name and Address of Cui	rrent Registered Agent			10. Name and Address of New R	egistered Agen	<u>t</u>	
SPANIOLI, JOHN M.		6	1 Name	•			
8741 SW 54 STREET			2 Street A	Address (P.O. Box Number is Not Accepta	ble)		
MIAMI FL 33165		8	3	, , , , , , , , , , , , , , , , , , ,			
		L	4 City		- 85	Zip C	Code
11. Pursuant to the provisions of Sections 607.					<u> </u>	L	
office or registered agent, or both, in the Slagent I am familiar with, and accept the of SIGNATURE Signature Typed or printed and of registers. 12. OFFICERS	nligations of Section 607.0505, Flo	orida Statut	es.	required when renslating) ADDITIONS/CHANGES TO OFF	DATE		
TITLE PTS	DELETE	1.1 T(TLE		700110101010101010101010101010101010101		hange	Addition
NAME SPANIOLI, JOHN M.		1.2 NAM	1			•	_
STREET ADDISESS 8741 SW 54 STREET		4	ET ADDRESS				
CITY - ST - ZIP MIAMI FL		1.4 CITY	- ST- Z IP				
TITLE	DELETE	2 1 TITL				Change	Addition
NAME:		2.2 NAM	Ε (
STREET ADORESS		23 STRE	et address				
CITY -ST-ZiF		2. 4 CIT	· ST - ZIP				
MILE	☐ DELETE	3.1 TITL				Change	Addition
NAME"		3.2 NAM	E				
STREET ADDRESS			ET ADDRESS				
City - S1 - ZIP	Driver		-ST-ZIP			760000	Addition
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NAME		4 2 NAM	1				
STREET ADDRESS			ET ADDRESS				
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TIFLE	L. Price I	5.1 HRJ 5.2 NAM	1			· · · · · · · · · · · · · · · · · · ·	Production
NAME STREET ADDRESS			ET ADDRESS				
SIMEEL ADDRESS CITY - ST - ZIP			-ST-ZIP				
TITLE	DELETE	6.4 CITY				Change	Addition
NAME	hand when the	62 NAM	J				
STREET ADDRESS		1	ET ADDRESS				
			- ST- ZIP				
CITY - ST - ZIP		0.4 (.11)	21.51	l			

14. I do hereby certily 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

SIGNATURE:

JOHN M. SPANIOLI