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 # K84794 1. Corporation Name

WINDJAMMER COMPUTER CORPORATION

							} 	#1611 #1811 #1811 #	1811 B1911 1886
Principal Place	e of Business	Mailing Address							
13711 SW 52ND		13711 SW 52ND PL							
FT LAUDERDALE FL 33330-2523 FT LAUDERDALE FL 33330-2523					DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated		3 SFACE	
						05/02/1989	or Quanted .		
								1 1 1	-U-d F
2. Principal P	lace of Business	2a. Mailing Addres	S			4. FEI Number			plied For
21		26				65-0118123			t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, e	tc.			5. Certifcate of Statu	s Desired	\$8.75 A	
22	<u> </u>	27	····					Fee Re	<u></u>
City & Stat	e · · · · · · · ·	City & State			•	6. Election Campaigr		\$5.00	· · · · · · · · · · · · · · · · · · ·
23		28				Trust Fund Contrib		Added t	o Fees
Zip	Country	Zip		untry		1	wes the current year II		п.,
24	25 29 30					Personal Property			□No
	9. Name and Address of Curre	nt Registered Agent		1041		10. Name and Addre	ss of New Registered	1 Agent	
TOW	TON JEDDY			81	Name				
	/BIN, JERRY	•		82	Street Addre	ess (P.O. Box Number is	Not Acceptable)		
	11 SW 52ND PL								
FIL	AUDERDALE FL 33330-2523			83					
				84	City	 .		85 Zip (Code
				044	City	•	FI		7000
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida	Statutes, the a	bove	e-named corpo	oration submits this state	ment for the purpose of	of changing its	registered
office or r	registered agent, or both, in the State im familiar with, and accept the oblig	e of Florida. Such change	was authorized	d by t	the corporation	n's board of directors. I h	nereby accept the app	ointment as re	gisterea
agent. 1 a	itt lättillar witti, and accept the oblig	ations of, decilor our to	oo, i loilda olat	igios.	•	•			
SIGNATURE	Signature, typed or printed name of registered ag-	ent and title if applicable.	(NOTE: Registered	d Agent	t signature required	when reinstating)	DATE		
12.		ND DIRECTORS	13.		,		GES TO OFFICERS A	ND DIRECTO	RS IN 12
TITLE	PD	□ DEL		ITLE				☐ Change	☐ Addition
NAME	TOWBIN, JERRY		1.2 N	AME	Ì				
	13711 SW 52ND PL				ADDRESS				
STREET ADDRESS	FT LAUDERDALE FL 33330-21	100			1				
CITY-ST-ZIP	FI LAUDENDALE PL 33330-21								
TITLE				ITY-ST	1-217			□ Change	☐ Addition
NAME		DELI	ETE 2.1 TI	ITLE	1-217			Change	Addition
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	,		ETE 2.1 TI 2.2 N 2.3 S	ITLE LAME STREET	ADDRESS			☐ Change	☐ Addition
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CITY-ST-ZIP TITLE			ETE 2.1 TI 2.2 No 2.3 Si 2.4 C	ITLE LAME STREET CITY-SI	ADDRESS			☐ Change	☐ Addition
		☐ DELI	ETE 2.1 TI 2.2 No 2.3 Si 2.4 C	ITLE LAME TREET CITY-ST	ADDRESS				
TITLE		☐ DELI	ETE 2.1 TI 22 N 2.3 S 2.4 C ETE 3.1 TI 3.2 N	ITLE IAME STREET CITY-ST TILE IAME	ADDRESS				
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14. I hereby certify that the information supplied with this filling 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

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90260 021 ***150.00