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Apr 23 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K89259

(1)

1. Corporation Name

E & P COMPUTERS, INC.



Principal Place of Business

305 PINE AVE.
P. O. BOX 1838
ANNA MARIA FL 34216

Mailing Address

305 PINE AVE.
P. O. BOX 1838
ANNA MARIA FL 34216-1838

2. Principal Place of Business

21 605 17TH AVE. W.

Suite, Apt. #, etc.

22 City & State

23 BRADENTON FL

Zip

24 34205

Country

25 USA

2a. Mailing Address

26 605 17TH AVE. W.

Suite, Apt. #, etc.

27 City & State

28 BRADENTON, FL

Zip

29 34205

Country

30 USA

3. Date Incorporated or Qualified

05/18/1989

3a. Date of Last Report

03/14/1996

4. FEI Number

65-0126555

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

ROST, EDWARD F.
305 PINE AVENUE
ANNA MARIA FL 34216

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP ☐ DELETE

NAME ROST, EDWARD F.
STREET ADDRESS 305 PINE AVENUE
CITY-ST-ZIP ANNA MARIA FL

TITLE D ☐ DELETE

NAME ROSS, FRANK
STREET ADDRESS 2911 GULF DRIVE NORTH
CITY-ST-ZIP HOLMES BEACH FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

ROSS, FRANCIS (FRANK) R.

2.3 STREET ADDRESS 611 GLADSTONE

2.4 CITY-ST-ZIP HOLMES BEACH, FL. 34217

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE: Edward F. Rost EDWARD F. ROST

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-16-97

Date

941-747-1429

Daytime Phone #

0434006

CRZE034 (9/96)