

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2004 08:00 AM
Secretary of State

DOCUMENT # L27451 1. Entity Name L & R TELECOMPUTER SERVICES, INC.	
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Principal Place of Business 1060 A KANE CONCOURSE BAY HARBOR ISLANDS, FL 33154 US	Mailing Address 1060 A KANE CONCOURSE BAY HARBOR ISLANDS, FL 33154 US
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04262004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0169023	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent RICE, ROBERT 1060 A KANE CONCOURSE BAY HARBOR ISLANDS, FL 33154
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**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

U000000135780
04/28/04-80072-009 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY ST ZIP	PD RICE, ROBERT L 1060 A KANE CONCOURSE BAY HARBOR ISLANDS, FL 33154
TITLE NAME STREET ADDRESS CITY ST ZIP	VSD LUTOV, ILONKA 1060 A KANE CONCOURSE BAY HARBOR ISLANDS, FL 33154
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12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Robert L Rice, Pres. ROBERT L RICE 4-23-04 305 864
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone

3646