**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **L50997**

1. Corporation Name

ANIZEI COMPUTERS CORP.

Principal Place of Business Mailing Address									61811 B1611 1661
13521 S.W. 113TH PLACE 13521 S.W. 113TH PLACE						1			
MIAMI FL 33176 MIAMI FL 33176					DO NOT WE	RITE IN THIS	SPACE		
US		US				3. Date Incorporated or Qualife		J J A C E	.,
						02/16/1990	•		
2 Principal P	lace of Business	2a. Mailing Address			_ <del></del>	4. FEI Number		.Aı	pplied For
21		26		-		65-0232290		<del> </del>	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.						\$8.75	Additional
22		27				5. Certifcate of Status Desired		Fee Ro	equired
City & Stat	e	City & State				6. Election Campaign Financing		\$5.00	May Be
23		28				Trust Fund Contribution		Added	to Fees
Zip	Country	Zip	Cour	ıtгу		8. This corporation owes the cu	rrent year Int		_
24	25	29	30			Personal Property Tax.		☑ Yes	□No
	9. Name and Address of Curre	ent Registered Agent		1		10. Name and Address of New	Registered	Agent	
CUT	EDDEZ CHADALIDE			81	Name				
GUTIERREZ, GUADALUPE 13521 SW 113TH PLACE				82	Street Addr	ress (P.O. Box Number is Not Accep	table)		-
MIAMI FL 33176									
MIAN	MI PL 331/6		ļ	83					Ĭ
			ŀ	84	City			85 Zip	Code
							F <u>L</u>	-, ,	
11. Pursuant	to the provisions of Sections 607.05	502 and 607.1508, Florida Statut	es, the ab	ove-	-named corp	poration submits this statement for the on's board of directors. I hereby acc	e purpose of ept the appoi	changing its intment as re	registered eaistered
agent. I a	m familiar with, and accept the oblig	gations of, Section 607.0505, Flo	rida Statu	tes.		,			
SIGNATURE									
				Agent	signature require	d when reinstating)	DATE	ID DIDECTO	NDC IN 42
12.		DELETE	13.	-	<del></del>	ADDITIONS/CHANGES TO C	FFICERS AF	Change	Addition
TITLE	PD ANIDAL	רון הברבוב				· • • • • • • • • • • • • • • • • • • •			Z / NOCIDON
NAME	GUTIERREZ, ANIBAL		1.2 NA				 		ļ
STREET ADDRESS	13521 SW 113 PL				AODRESS		<u></u>		٠,
CITY-ST-ZIP	MIAMI FL	□ DELETE	1.4 CIT		·ZIP	**	<u> </u>	Change	Addition
TITLE	STD	. Dereie	2.1 ∏∏		١.		<b>0</b> ,1	Colorido	.  /10010011
NAME	GUTIERREZ, GUADALUPE		2.2 NA			The same of the sa			
STREET ADDRESS	13521 SW 113 PL				ADDRESS	and the Control of th			i
CITY-ST-ZIP	MIAMI FL	M DELETE	2.4 CI		-ZIP			☐ Change	Addition
TITLE		C DELETE	3.1 TIT				,	☐ Criange	
NAME			3.2 NA					•	Ì
STREET ADDRESS			3.3 STI	REET A	ADORESS				Į
CITY-ST-ZIP									
			3.4. CI		-ZIP			Charge	□ Addition
TITLE NAME		☐ DELETE	3.4. CD 4.1 TITE 4. 2 NA	LE	-ZIP			Change	☐ Addition

CITY-ST-ZIP 14. 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 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.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

54 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

**SIGNATURE:** 

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

C/TY-ST-ZIP

CITY-ST-ZIP

Guadalipe

DELETE

☐ DELETE

Cutiexpez

☐ Change

Change

☐ Addition

☐ Addition

Apr 20, 1999 8:00 am Secretary of State

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