

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 28 PM 6:00**

DOCUMENT # L73235 (8)

1. Corporation Name

PORTABLE COMPUTERS PLUS, INC.

Principal Place of Business

**C/O DEBRA E. FORMAN
3399 NW 72ND AVE #106
MIAMI FL 33122**

Mailing Address

**C/O DEBRA E. FORMAN
3399 NW 72ND AVE #106
MIAMI FL 33122**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/14/1990

3a. Date of Last Report

03/28/1994

4. FEI Number

65-0201234

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

2. Principal Place of Business

21 Suite, Apt #, etc

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt #, etc

27 City & State

28 Zip

29 Country

30 Country

9. Name and Address of Current Registered Agent

**FORMAN, DEBRA
6303 BROOKWOOD BL
TAMARAC FL 33319**

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 Director (if applicable)

NOTE: Registered Agent signature required after registration

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP
P	FORMAN, DEBBIE	3399 NW 72ND AVENUE	MIAMI FL
S	FORMAN, JOE	3399 NW 72ND AVENUE	MIAMI FL
VP	DAVIS, SCOTT	3399 NW 72 AVE	MIAMI FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY, ST, ZIP	Change	Addition
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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. 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 as an attachment with an address.

SIGNATURE:

Sandra B. Mathews
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-20-95
DATE

305513604
Signature Number