2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M41451

FILED Apr 27, 2007 Secretary of State

Entity Name: NATIONWIDE COMPUTER SYSTEMS, INC. **New Principal Place of Business: Current Principal Place of Business:** 4700 HIATUS ROAD SUITE 154 SUNRISE, FL 33351 **Current Mailing Address: New Mailing Address:** PO BOX 551149 **DAVIE, FL 33355** FEI Number: 59-2782497 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BURNS, MICHAEL A BURNS, MICHAEL A NATIONWIDE COMPUTER SYSTEMS NATIONWIDE COMPUTER SYSTEMS PO BOX 551149 4700 HIATUS RD., # 154 DAVIE, FL 33355 US SUNRISE, FL 33351 US 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. SIGNATURE: 04/27/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition BURNS, MICHAEL A Name: Name: 20201 SW 48TH STREET Address: Address: City-St-Zip: FT LAUDERDALE, FL 33334 City-St-Zip: Title: ٧S () Delete Title: () Change () Addition FANTACONE, THOMAS Name: Name: 531 SW 112TH AVENUE Address: Address: PLANTATION, FL 33325 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TOM FANTACONE VP 04/27/2007