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**Feb 10 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 # M56343 (0)
1. Corporation Name
COMPUTRAGE INVESTMENT GROUP, INC.



Principal Place of Business
**4026 INVARRARY BLVD.
STE. 1715
LAUDERHILL FL 33319**

Mailing Address
**P.O. BOX 451012
SUNRISE FL 33345-1012**

3. Date Incorporated or Qualified
07/29/1987

3a. Date of Last Report
07/26/1996

2. Principal Place of Business
21 **4323 NW 65 Terr**
22 Suite, Apt. # etc

2a. Mailing Address
26 **PO Box 451012**
27 Suite, Apt. #, etc.

23 **CORAL SPRINGS**
City & State

28 **CORAL SPRINGS**
City & State

24 **33067**
Zip

25 Country

29 **33067**
Zip

30 Country

4. FEI Number
NOT APPLICABLE

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
**GLASER, BRUCE
4026 INVARRARY BLVD.
STE. 1715
LAUDERHILL FL 33319**

10. Name and Address of New Registered Agent

81 Name **GLASER BRUCE**

82 Street Address (P.O. Box Number is Not Acceptable)
4323 NW 65 Terr

83

84 City **CORAL SPRINGS** FL 85 Zip Code **33067**

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]* **1/30/97**
DATE

12. OFFICERS AND DIRECTORS

TITLE DELETE

NAME **PDT GLASER, BRUCE**

STREET ADDRESS **4331 N.E. 115TH TERR.**

CITY - ST - ZIP **SUNRISE FL**

TITLE DELETE

NAME **VD GLASER, HOWARD**

STREET ADDRESS **16 DARLING ROAD**

CITY - ST - ZIP **WALDWICK, NJ.**

TITLE DELETE

NAME **SD GLASER, TINA**

STREET ADDRESS **16 DARLING ROAD**

CITY - ST - ZIP **WALDWICK, NJ.**

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 **BRUCE GLASER**

1.3 STREET ADDRESS **4323 NW 65 Terr**

1.4 CITY - ST - ZIP **CORAL SPRINGS FL 33067**

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

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 **400002083334**

6.3 STREET ADDRESS **-02/11/97--01042--010**

6.4 CITY - ST - ZIP *****165.00**

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: *[Signature]* **Bruce GLASER** **1/30/97 (954)755-7440**
DATE Daytime Phone #

CR2E034 (9/96)