FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M60142

1. Corporation Name

DIGITAL COMPUTER SYSTEMS, INC.

FILED Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90095 022 ***150.00



Principal Place	of Business	Mailing Address				 	
6414 N.W. 82ND AVE. 6414 N.W. 82ND AVE.							
MIAMI FL 33166 MIAMI FL 33166					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed		
					10/02/1987		
2. Principal Pla	ace of Business	2a. Mailing Address				olied For	
			78 Ter	rr 65-0061292 No	Applicable		
Suite, Apt. #, etc. Suite, Apt. #, etc.				\$8.75 A	•		
22 27					Fee Re	quired	
City & State City & State					6. Election Campaign Financing \$5.00		
		28 Miami	Country		Trust Fund Contribution Added to	rees	
Zip Country Zip 23/83 [25] 29 33/83		o Country		8. This corporation owes the current year Intangible Personal Property Tax.	□No		
24 33/85 25 29 33/85 39 39 31/85 3			<u> </u>		10. Name and Address of New Registered Agent		
	3. Haile and Address of Curteri						
CHIR	RINO, JOSE			0	ddress (P.O. Box Number is Not Acceptable)		
12040 SW 78TH TERR			82	Street Aut	duress (P.O. Box Number is Not Acceptable)		
MIAN	/ii FL 33183		83				
			84	City	85 Zip C	'ode	
•					FL T		
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			nt signature requi	uired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	DS IN 12	
12.	OFFICERS AND	DELETE DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	Addition	
TITLE	CHIRINO, JOSE A.	U DELETE	1.2 NAME				
NAME STREET ADDRESS	12040 SW 78 TERR			T ADDRESS		Ì	
CITY-ST-ZIP	101111		1.4 CITY-5		·		
TITLE			2.1 TITLE	/1 - 211	☐ Change	Addition	
NAME	CHIRINO, MAILIN C.		2.2 NAME		•		
STREET ADDRESS	12040 SW 78 TERR		2.3 STREE	TADORESS			
CITY-ST-ZIP	MIAMI FL		2. 4 CITY-	ST-ZIP	nten.		
TITLE		☐ DELETE	3.1 TITLE		☐ Change	☐ Addition	
NAMÉ			3.2 NAME			ì	
STREET ADDRESS			3.3 STREE	T ADDRESS		1	
CITY-ST-ZIP			3.4. CITY-	ST-ZIP	· · · · · · · · · · · · · · · · · · ·	- In a delition	
TITLE		☐ DELETE	4.1 TITLE		. Change	Addition	
NAME			4. 2 NAME		·		
STREET ADDRESS				TADORESS			
CITY-ST-ZIP			4.4 CITY-5	ST-ZIP	Change	Addition	
TITLE		☐ DETEIE	5.1 TITLE 5.2 NAME	1	☐ Change		
NAME				T ADDRESS			
STREET ADDRESS			5.4 CITY-1		•		
CITY-ST-ZIP TITLE		DELETE	6.1 TITLE		Change	Addition	
NAME			6.2 NAME		_ ,	1	
STREET ADDRESS			6.3 STREE	T ADDRESS			
CITY-ST-ZIP			6.4 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 a statement with an address, with all other like empowered.

SIGNATURE:

Jase