2004 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL REPORT									
DOCUMENT # P01000087773									
Entity Name BUSINESS GROUP COMPUTERS, INC.						, , , , , , , , , , , , , , , , , , ,	ستر		
ROSINES				FILE	_)				
			600 11	J. Kar	በፌ	MAY -6	M 10:51		
Principal Place of Business Mailing Address									
3884 PROGRESS AVE., #4 3884 PROGRESS AVE., # NAPLES, FL 34104 NAPLES, FL 34104			#4		SEC	RETARY OF			
14/4 223,72			IALU	"AHASSEE. ••••••••••••••	FLORIDA		# ##		
Principal Place of Business 3. Mailing Address									
302 MORGAN RD SAN					#.`		# #	IT 1 48	
Suite, Apt. #, etc. Suite, Apt. #, etc.					01142004	Chg-P	CR2E00	34 (10/03)	
City & Stat		City & State			4. FEI Number Applied For No:				
Zip	Country	Zip	Country	Ountry				\$8.75 Add	: Applicable
3	4114 USA					of Status Desired		ee Require	
	6. Name and Address of Current	Name			Address of New		-		
WILLIAMS GINNY!						L. WIL		<u>s</u>	
3884 PRO NAPLES, i	Street A	dgress (F	P.O. Box Numbe 2 Mor	er is Not Acceptai - 💪 🍛 N	$\mathcal{R}_{\mathcal{D}}$				
NAPLES, I	, , , , , , , , , , , , , , , , , , ,								
2				N D 1	P (E 2 C		FL	Zip Coo	
8. 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. Large largitar with land ac								and adden!	
the obligations of registered agent.									
SIGNATURE Signature, typed or printed notifie of registered agent and title of applicable. (NOTE: Registered Agent signature (required where remislating) (1945)									
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution									
*		* * * * * * * * * * * * * * * * * * *	- -			ZULIJAŠA TO Z	acide Division		
TITLE	OFFICERS AND	DIRECTORS Delete	11., _{1/4} ,		ADDITIONS	CHANGES TO O	FFICERS AND	DIRECTOR:	S U 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
NAME	WILLIAMS, BRIAN	L. Delete	NAME					Z chang	
STREET ADDRESS	3884 PROGRESS AVE., #4		STREFT ADDRESS		MORGI				
CITY-ST-ZIP	NAPLES, FL 34104		CITY-ST-ZIP	47	PLES F	34114	<u> </u>	Change	☐ Adduso
TITLE NAME	WILLIAMS, FREDERICK	☐ Delete	NAME					C1 Cuantie	C Mulling
STREET ADDRESS	298 MORGAN RD.		STREET ADDRESS		10	00362 0401087	7998	31	
CITY-ST-ZIP	NAPLES, FL 34114		CITY-ST ZIP		05/13/	0401087	D13 *		
TITLE NAME	D WILLIAMS GINNY L	Delete	TITLENAME					Ж Спавде	Addition
STREET ADDRESS	3884 PROGRESS AVE., #4		STREET ADDRESS	30	2 More	as use	=		
CITY-ST-ZIP	NAPLES, FL 34104		CITY-ST-ZIP	NA	PLES, F	L 3411	4		
TITLE		☐ Delete	TITLE					☐ Change	Addition
NAME STREET ADDRESS			NAME STREET ADDRESS						
CITY-ST-ZIP			CITY-ST-ZIP						
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NAME		•	NAME.						
STREET ADDRESS CITY-ST-ZIP		Serie a la l	STREET ADDRESS		54 Septi			5.0"	
TITLE		Delete	_ TIT\ E		7	· · · · · ·		Change	☐ Addition
NAME		(દે!	NAME STREET ADDRESS		5 · ·				
STREET ADDRESS			CITY+ST-ZIP			•			
CITY-ST-ZIP									

12. Thereby certify that the information supplied with this filling does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. Hurther certify that the information indicated on this report or supplemental 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 direction 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/04