


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 25, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # P03000040171

1. Entity Name  
 CSS COMPUTERS CORP.



Principal Place of Business      Mailing Address

7254 NW 31ST. ST      7254 NW 31ST. ST  
 MIAMI, FL 33122      MIAMI, FL 33122

**DO NOT WRITE IN THIS SPACE**



04202005    No Chg-P    CR2E034 (10/03)

4. FEI Number      Applied For  
 01-3751559      Not Applicable

5. Certificate of Status Desired        \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TAGAMI, SUSY  
 14142 SW 62 ST.  
 MIAMI, FL 33183

**DO NOT WRITE IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.        \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	TAGAMI, SUSY
STREET ADDRESS	14142 SW 62 ST.
CITY-ST-ZIP	MIAMI, FL 33183
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000329113  
 04/25/05-80103-022 150.00

**DO NOT WRITE IN THIS SPACE**

12. 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 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:       4/19/05 305-591-7411  
SIGNATURE, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #