

2005 FOR PROFIT CORPORATION ANNUAL REPORT

APPROVED
7/7/2005-90079-011 \$150.00-\$150.00
FILED

05 AUG 30 AM 10:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

60005



07012005 Chg-P CR2E034 (10/03)

DOCUMENT # P04000063103			
1. Entity Name DAVE'S COMPUTER RECYCLING INC.			
Principal Place of Business 2514 SHANNON RD. ORLANDO, FL 32806		Mailing Address 2514 SHANNON RD. ORLANDO, FL 32806	
2. Principal Place of Business 6440 Pinecastle BLVD		3. Mailing Address 2514 SHANNON RD	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Orlando, FL		City & State Orlando, FL	
Zip	Country ORANGE	Zip 32806	Country ORANGE
4. FEI Number 07012005		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent LASSITER, DAVID 2514 SHANNON RD. ORLANDO, FL 32806		7. Name and Address of New Registered Agent Name: DAVID Lassiter Street Address (P.O. Box Number is Not Acceptable): 2514 SHANNON RD City: Orlando FL Zip Code: 32806	
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: <u>David Lassiter</u> DATE: <u>7/3/05</u> <small>Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	P LASSITER, DAVID 2514 SHANNON RD. ORLANDO, FL 32806	<input type="checkbox"/> Delete	<input type="checkbox"/> Addition
TITLE		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: <u>David Lassiter</u> <u>David Lassiter</u>		DATE: <u>7/3/05</u> PHONE: <u>407-443-6227</u>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small> <small>Daytime Phone #</small>	