

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY -1 PM 10: 04

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # P07885 (7)

1. Corporation Name

AVNET COMPUTER TECHNOLOGIES LEASING, INC.

Principal Place of Business

**C/O AVENT INC.
80 CUTTER MILL ROAD
GREAT NECK NY 11021
US**

Mailing Address

**C/O AVENT INC.
80 CUTTER MILL ROAD
GREAT NECK NY 11021
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

10/28/1985

3a. Date of Last Report

05/01/1994

4. FEI Number

41-1530771

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. 192.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 and title if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P
NAME	VALLEE, ROY
STREET ADDRESS	10950 WASHINGTON BLVD.
CITY - ST - ZIP	CULVER CITY CA
TITLE	TD
NAME	SADOWSKI, RAYMOND
STREET ADDRESS	80 CUTTER MILL RD.
CITY - ST - ZIP	GREAT NECK, NY.
TITLE	VSD
NAME	BIRK, DAVID R.
STREET ADDRESS	80 CUTTER MILL RD.
CITY - ST - ZIP	GREAT NECK, NY.
TITLE	VAS
NAME	SADOWSKI, RAYMOND
STREET ADDRESS	80 CUTTER MILL RD.
CITY - ST - ZIP	GREAT NECK, NY.
TITLE	D
NAME	MACHIZ, LEON
STREET ADDRESS	80 CUTTER MILL RD
CITY - ST - ZIP	GREAT NECK NY
TITLE	AS
NAME	PALUMBO, LISA M.
STREET ADDRESS	80 CUTTER MILL RD
CITY - ST - ZIP	GREAT NECK NY

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
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	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 liquidator 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:

David R. Birk
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 24, 1995

Date

(Type or Print)

DAVID R. BIRK,

VICE PRESIDENT, SECRETARY & DIRECTOR