FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 AM 1:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000001372 (0)**

1. Corporate Name

BITS & BYTES ACCOUNTING SERVICES, INC.

Principal Place of Business
6215 SYRINGA LANE
JACKSONVILLE FL 32211

Mailing Address
6215 SYRINGA LANE
JACKSONVILLE FL 32211

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **01/04/1993**

3a. Date of Last Report: **05/01/1994**

2. Principal Place of Business
21

2a. Mailing Address
26

Suite, Apt. # or Bldg.
22

Suite, Apt. # or Bldg.
27

City & State
23

City & State
28

24 25 29 30

4. FEI Number: **59-3157030** — 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. The corporation has liability for intangible tax under s. 199.032 Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

COATES, IONA K
6215 SYRINGA LANE
JACKSONVILLE FL 32211

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

11. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of section 607.325, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	DP
NAME	COATES, IONA K
ADDRESS	6215 SYRINGA LANE
CITY ST ZIP	JACKSONVILLE FL 32211
TITLE	DV
NAME	COATES, DAVID S
ADDRESS	6215 SYRINGA LANE
CITY ST ZIP	JACKSONVILLE FL 32211

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Add/Del

14. I hereby certify that the information supplied with this report is accurate, and I am familiar with and agree to the requirements of Section 607.325, Florida Statutes. I further certify that the information indicated on this report or supplemental report is accurate and that the mailing address, the street address of the registered office and the registered agent, and the officers and directors, as amended by this report or supplemental report, comply with Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 hereof as an officer or director.

SIGNATURE: Iona K. Coates — 4/28/95 — 904-744-0027

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0017376 CP