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May 13 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P93000007616 (4)

1. Corporation Name
ONLINE PC CONNECTIONS, INC.



Principal Place of Business
2301 NW 96TH TERR
C
PEMBROKE PINES FL 33024
US

Mailing Address
2301 NW 96TH TERR
C
PEMBROKE PINES FL 33024
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/29/1993

2. Principal Place of Business

21 481 NW 102 Terr
Suite, Apt. #, etc.

22

City & State

23 Pembroke Pines, FL

24 33056

25 Blvd

9. Name and Address of Current Registered Agent

GLICK, THOMAS E
11900 BISCAYNE BLVD.
SUITE 704
NORTH MIAMI FL 33181

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE

NAME GRANADOS, WILLIAM J
STREET ADDRESS 13234 SW 60TH LANE
CITY-ST-ZIP KENDALE LAKES FL 33183-5104

TITLE P ☐ DELETE

NAME CABRAL, JOHN
STREET ADDRESS 2301 NW 96TH TERR. #C
CITY-ST-ZIP PEMBROKE PINES FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

481 NW 102 Terr
Pembroke Pines, FL 33026

14. 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 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 trustee 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 *[Signature]* 4/25/98 (305) 934-5775

CR2E034 (10/97)