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

95 JUL 18 PM 9:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000018[illegible]

1. Corporation Name: Rocha Computer consultants, Inc

Principal Place of Business	Mailing Address
301 HAMPTON LANE Key Biscayne, Fl. 33149	301 HAMPTON LANE Key Biscayne, Fl. 33149

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified | 3a. Date of Last Report

2. Principal Place of Business	2a. Mailing Address
21 301 HAMPTON LANE	26 301 HAMPTON LANE
Suite, Apt. #, etc. 22 —	Suite, Apt. #, etc. 27 —
City & State 23 Key Biscayne, Fl	City & State 28 Key Biscayne, Fl
Zip / Country 24 33149 / 25 U.S.A.	Zip / Country 29 33149 / 30 USA

4. FEI Number: 65-0497437 — 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. 199.032 Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
Beatriz Rocha 301 HAMPTON LANE KEY Biscayne, Fl. 33149	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: Beatriz Rocha — 5-1-95
Signature, Typed or Printed Name of Registered Agent and the Applicable Date — (If Changing Registered Agent, Signature of New Registered Agent Required) — Date

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS CITY-ST-ZIP Beatriz Rocha - President 250 Galaga Drive #31 Key Biscayne, Fl. 33149	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP ☒ Change ☐ Addition President Beatriz Rocha 301 HAMPTON LANE, Key Biscayne, Fl 33149
TITLE NAME STREET ADDRESS CITY-ST-ZIP	21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP ☐ Change ☐ Addition 700001545057 -07/25/95--01053--006 ****225.00 ****225.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP ☐ Change ☐ Addition CH

14. I declare, only that the information required by this form is accurately furnished and 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 added on an attachment with an address.

SIGNATURE: Beatriz Rocha — 5-1-95 — (305)547-5760
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #