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Apr 25 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P93000023687 (5)

1. Corporation Name  
ORBIT U.S.A. COMPUTERS, INC.



Principal Place of Business

113 SE 1ST AVE  
MIAMI FL 33131  
US

Mailing Address

113 SE 1ST AVE  
MIAMI FL 33131-1001  
US

3. Date Incorporated or Qualified  
03/23/1993

3a. Date of Last Report  
04/25/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

4. FEI Number

65-0406428

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

CARLOS E. PLACUCCI  
~~3630 NW 85 WAY, #307~~  
~~SUNRISE FL 33351~~

81 Name

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

740 S.W. 93RD TERRACE

83

84 City

PEMBROKE PINES

85

Zip Code

FL 33025

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 type for printed name of registered agent and if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ~~DC~~ ☒ DELETE

NAME ~~DEPAULA, HZUYK~~  
STREET ADDRESS ~~3044 J.W. 27TH AVE~~  
CITY-ST-ZIP ~~MIAMI FL~~

1.1 TITLE ☐ Change ☐ Addition

TITLE DPT ☐ DELETE

NAME PLACUCCI, CARLOS E.  
STREET ADDRESS ~~3630 NW 85 WAY #307~~  
CITY-ST-ZIP ~~SUNRISE FL~~

2.1 TITLE ☐ Change ☐ Addition

TITLE D ☐ DELETE

NAME PLACUCCI, CESAR A.  
STREET ADDRESS ~~9517 J.W. 27TH AVE~~  
CITY-ST-ZIP ~~MIAMI FL~~

2.2 NAME ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

2.3 STREET ADDRESS ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

2.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

740 S.W. 93RD TERRACE  
PEMBROKE PINES FL, 33025

9517 N.W. 42ND STREET  
SUNRISE FL, 33351

14. I do 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 if an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Carlos E. Placucci

4/17/97

406-1124

CR2E034 (9/96)