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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 19 AM 10: 12

DOCUMENT # P93000030818 (7)

1. Corporation Name

PREFERRED COMPUTER CONSULTANTS, INC.

Principal Place of Business	Mailing Address
1250 EAST HALLANDALE BEACH BLVD. SUITE 608 HALLANDALE FL 33009	1250 EAST HALLANDALE BEACH BLVD. SUITE 608 HALLANDALE FL 33009

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 04/27/1993
3a. Date of Last Report: 04/29/1994
4. FEI Number: 65-0412354 — 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

2. Principal Place of Business	2a. Mailing Address
21 1250 EAST HALLANDALE BCH BLVD	26 1250 E. HALLANDALE BCH BLVD
Suite, Apt. #, etc. 22 SUITE 603	Suite, Apt. #, etc. 27 SUITE 603
City & State 23 HALLANDALE, FL	City & State 28 HALLANDALE, FL
Zip 24 33009 — Country 25 U.S.A.	Zip 29 33009 — Country 30 U.S.A.

9. Name and Address of Current Registered Agent

RODRIGUEZ, CARLOS M
7850 N.W. 146TH STREET
SUITE 401
MIAMI FL 33016

10. Name and Address of New Registered Agent

81 Name: RODRIGUEZ CARLOS M.
82 Street Address (P.O. Box Number is Not Acceptable): 1250 E. HALLANDALE BEACH BLVD, ~~SUITE 603~~
83 SUITE 603
84 City: HALLANDALE FL 85 Zip Code 33009

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 x [signature] (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1 1 TITLE	☐ Change ☐ Addition
NAME	RODRIGUEZ, CARLOS M	1 2 NAME	
STREET ADDRESS	16445 COLLINS AVE. #1125	1 3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI BEACH FL 33160	1 4 CITY-ST-ZIP	
TITLE	VD	2 1 TITLE	VD ☒ Change ☐ Addition
NAME	SANCHEZ, EDILBERTO	2 2 NAME	SANCHEZ, EDILBERTO
STREET ADDRESS	19390 COLLINS AVE. APT. 1107	2 3 STREET ADDRESS	3725 S. OCEAN DRIVE, # 1502
CITY-ST-ZIP	MIAMI BEACH FL 33160	2 4 CITY-ST-ZIP	HOLLYWOOD, FL 33019
TITLE		3 1 TITLE	VD ☐ Change ☒ Addition
NAME		3 2 NAME	CAMEJO, ARMANDO
STREET ADDRESS		3 3 STREET ADDRESS	3977 SW 143 PL
CITY-ST-ZIP		3 4 CITY-ST-ZIP	MIAMI, FL 33175
TITLE		4 1 TITLE	☐ Change ☐ Addition
NAME		4 2 NAME	
STREET ADDRESS		4 3 STREET ADDRESS	
CITY-ST-ZIP		4 4 CITY-ST-ZIP	
TITLE		5 1 TITLE	☐ Change ☐ Addition
NAME		5 2 NAME	
STREET ADDRESS		5 3 STREET ADDRESS	
CITY-ST-ZIP		5 4 CITY-ST-ZIP	
TITLE		6 1 TITLE	☐ Change ☐ Addition
NAME		6 2 NAME	
STREET ADDRESS		6 3 STREET ADDRESS	
CITY-ST-ZIP		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 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: x [signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0077700 CP