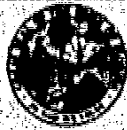


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 PM 8:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000032641 (1)

1. Corporation Name

P.E.D. DATA PROCESSING, INC.

Principal Place of Business

Mailing Address

931 COUNTRY CLUB PK
DELAND FL 32724
US

931 COUNTRY CLUB PK
DELAND FL 32724
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

05/03/1993

3a. Date of Last Report

05/01/1994

4. FEI Number

59-3187555

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

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GARCIA-CREWS, ANTONIO
445 DOUGLAS AVENUE
SUITE 2005-15
ALTAMONTE SPRINGS FL 32714

81 Name

MACEDO, ANTONIO

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

931 Country Club Park

83

84 City

DeLand

85 FL

86 Zip Code

32724

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

ANTONIO MACEDO

ANTONIO MACEDO, PRESIDENT

4/27/95

Signature, typed or printed name of registered agent and date if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME MACEDO, ANTONIO
STREET ADDRESS 931 COUNTRY CLUB PK
CITY-ST-ZIP DELAND FL

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE D
NAME MACEDO, MARIA E
STREET ADDRESS RUA MARIO FERRAR #77, APT. 22
CITY-ST-ZIP 01453 SAO PAULO, BRAZIL FL

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE SS
NAME SMALUTA, REGINA
STREET ADDRESS 931 COUNTRY CLUB PK
CITY-ST-ZIP DELAND FL

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME S
3.3 STREET ADDRESS MALUTA, REGINA
3.4 CITY-ST-ZIP 931 Country Club Park
DeLand FL 32724

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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 110.07(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:

ANTONIO MACEDO

4/27/95

(Date)

(904) 738-2437

Signature and typed or printed name of signing officer or director

Anytime 1 Year