## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000044741 (5)

**FILED** May 01 1998 8:00am Secretary of State

SUNCOAST COMPUTER TECHNOLOGIES, INC.							1 10 2 11 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Principal Plac	Mailing Ad	Idress				T TO BELLEAU THE TOTAL OF THE CONTROL OF THE CONTRO		
15373 ROOSEVELT BLVD. 15373 ROOSEVELT BLVD.					).			
SUITE 202				SUITE 202				DO NOT WRITE IN THIS SPACE
CLEARWATER US	4 FL 3462U			CLEARWATER FL 34620 US				3. Date Incorporated or Qualified
			00					06/21/1993
2. Principal P	lace of Busines	SS	2a. Maiting	2a, Mailing Address				4. FEI Number Applied For
21			├─¬ ~	26				59-3191898 Not Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.				SR 75 Additional
22			27	27				5. Certificate of Status Desired Fee Required
City & State	е		City & S	City & State				6. Election Campaign Financing \$5.00 May Be
23			28	·				Trust Fund Contribution Added to Fees
Zip	Country		Zip	Zip C		Country		8. This corporation owes or has paid the current year Intangible
24		25 29 30		30			Personal Property Tax due June 30.  Yes No	
		nd Address of Curre	int Registered Ag	gent		81	Name	10. Name and Address of New Registered Agent
Kinsel, John C						ا'°	name	
	01 SANDPIPE				82	Street A	Address (P.O. Box Number is Not Acceptable)	
CLEARWATER FL 34822						63		
					Ì	0.3		
					Ī	84	City	FL 85 Zip Code
44 Dureuant	to the provision	on of Sections 607 05	02 and 607 1508	Eleviela Statut	os tho sh	70/40	a named c	
office or r	egistered agen	nt, or both, in the Stat	e of Florida Such	change was a	es, me ac authorized	J by	the corpo	d corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
agent. I a	ım <b>fa</b> miliar with,	and accept the oblig	gations of, Section	1 607.0505, Flo	orida Stati	utes	S.	
SIGNATURE	Stonature Isroed or a	ponted name of registered ag	ent and little if anotherable	e (NOI	L: Begistered	1 Age	nt signature r	e required when reinstating) DATE
12.			ND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D			DELETE	1.1 1(1	TLE .	T	Change Addition
NAME	KINSEL, J	OHN C				1.2 NAME		·
STREET ADDRESS 2901 SANDPIPER DRIVE				1.3 STREET ADDRESS			ADDRESS	
CITY-ST-ZIP	ST-ZIP CLEARWATER FL 34622					14 CITY-ST-ZIP		
TITLE	_			DELETÉ	2 i TiT	ILE.		Change Addition
NAME					2.2 NA	ME		
STREET ADDRESS					2.3 STI	REET	ADDRESS	
CITY-ST-ZIP		·			2. 4 Cl		ST - ZIP	
TITLE				DELETE	3.1 TIT			Change L Addition
NAME					3.2 NA			
STREET ADDRESS							ADDRESS	
CITY-ST-ZIP				DELETE	3.4. CI		IT-ZIP	Change Addition
TITLE			·	-) pricit	4.1 III		-	
NAME CORECT ADDRESS					4. 2 NA		ADDDESS	
STREET ADDRESS CITY-S1-ZIP							ADDRESS	
TITLE				DELETE	4.4 CII 5.1 TIT		1-214	Change Addition
NAME			'		5.2 NA			C Onargo C Notinon
STREET ADDRESS					4		ADDRESS	
CITY-ST-ZIP					5.4 CIT			
TITLE	<del></del>			DELETE	6.1 TIT		. 4"	☐ Change ☐ Addition
NAME			·		6.2 NAI		ĺ	
STREET ADDRESS							ADDRESS	
CITY-ST-ZIP					6.4 CIT			
	certify that the in	nformation supplied s	with this filing doe	s not qualify fo				ed 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 amy address.

SIGNATURE:

(813)532-4906