

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P93000046218 (2)

1. Corporation Name

COMPUTER C.A.D. CONNECTION, INC.



Principal Place of Business

6640 NW 21ST ST  
MARGATE FL 33063

Mailing Address

6640 NW 21ST ST  
MARGATE FL 33063

2. Principal Place of Business

21 4964 SW 5TH COURT

Suite, Apt. #, etc.

22

City & State

23 MARGATE FL.

Zip

24 33068

Country

25 BROWARD

2a. Mailing Address

26 4964 SW 5TH COURT

Suite, Apt. #, etc.

27

City & State

28 MARGATE FL.

Zip

29 33068

Country

30 BROWARD

3. Date Incorporated or Qualified

06/30/1993

3a. Date of Last Report

03/01/1995

4. FEI Number

65-0421505

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

REUTLINGER, RICHARD  
6640 NW 21ST ST  
MARGATE FL 33063

10. Name and Address of New Registered Agent

81 Name RICHARD REUTLINGER

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

4964 SW 5TH COURT

83

84

City

MARGATE

FL

85 Zip Code

33068

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE  
NAME D REUTLINGER, RICHARD  
STREET ADDRESS 6640 NW 21ST ST  
CITY - ST - ZIP MARGATE FL 33063

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

TITLE  
NAME  
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CITY - ST - ZIP

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TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D REUTLINGER, RICHARD ☒ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS 4964 SW 5TH COURT  
1.4 CITY - ST - ZIP MARGATE FL. 33068

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

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY - ST - ZIP ☐ Change ☐ Addition

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

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

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP ☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

04/24/96

954-984-6227

CR2E034 (12/95)