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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P93000050080 (9)**

1. Corporation Name

COMPUTER AND NETWORK SERVICE, INC.



Principal Place of Business

Mailing Address

**1600 S DIXIE HWY
1D
BOCA RATON FL 33432
US**

**1600 S DIXIE HWY
1D
BOCA RATON FL 33432
US**

3. Date Incorporated or Qualified

07/16/1993

3a. Date of Last Report

02/14/1995

2. Principal Place of Business

2a. Mailing Address

21 Subst. Apt. #, etc.

26 Subst. 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

**CANTOR, EDWARD
1600 S DIXIE HWY 1-D
BOCA RATON FL 33432**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0902 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 607.0904, Florida Statutes.

SIGNATURE

Edward Cantor Pres 2/12/96

(Signature of Registered Agent) (Signature of Registered Agent)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	DPC	☐ DELETE
NAME	CANTOR, ED	
STREET ADDRESS	1600 S DIXIE HWY #1D	
CITY-STATE-ZIP	BOCA RATON FL	
TITLE	DVP	☒ DELETE
NAME	SELMAN, RANDY	
STREET ADDRESS	1600 S DIXIE HWY #1D	
CITY-STATE-ZIP	BOCA RATON FL	
TITLE	DVP	☐ DELETE
NAME	HEINO, GLENN	
STREET ADDRESS	1600 S DIXIE HWY #1D	
CITY-STATE-ZIP	BOCA RATON FL	
TITLE	DVPM	☒ DELETE
NAME	SAPERSTEIN, ALAN	
STREET ADDRESS	1600 S. DIXIE HWY. 1D	
CITY-STATE-ZIP	BOCA RATON FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY-STATE-ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY-STATE-ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY-STATE-ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY-STATE-ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY-STATE-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 19.07(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:

Edward Cantor Pres 2/12/96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DATE OF FILING

CR2E034 (12/95)