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FILED
Feb 27 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P93000065472 (1)

1. Corporation Name
NATIONAL COMPUTER SALES, INC.



Principal Place of Business

5453 W WATERS AVENUE
BLDG B SUITE 103
TAMPA FL 33634
US

Mailing Address

5453 W WATERS AVENUE
BLDG B SUITE 103
TAMPA FL 33634
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/21/1993

4. FEI Number

59-3206352

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 2502 ROCKY POINT DR.

Suite, Apt. #, etc.

22 740

City & State

23 TAMPA, FL

Zip

24 33607

Country

25 US

2a. Mailing Address

26 2502 ROCKY POINT DR.

Suite, Apt. #, etc.

27 740

City & State

28 TAMPA, FL

Zip

29 33607

Country

30 US

9. Name and Address of Current Registered Agent

BURKE, JOE F
5453 W WATERS AVENUE
BLDG B SUITE 103
TAMPA FL 33634

10. Name and Address of New Registered Agent

81 Name

JOE F BURKE

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

2502 ROCKY POINT DR.

83

SUITE 740

84

TAMPA

FL

85 Zip Code

33607

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

2/23/98

12. OFFICERS AND DIRECTORS

TITLE PS ☐ DELETE

NAME BURKE, JOE F JR
STREET ADDRESS 13807 LAKE VILLAGE PLACE
CITY-ST-ZIP TAMPA FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PS/CEO ☒ Change ☐ Addition

1.2 NAME JOE F BURKE JR

1.3 STREET ADDRESS 2502 ROCKY POINT DR. #740

1.4 CITY-ST-ZIP TAMPA, FL 33607

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 an address.

SIGNATURE

Joe F Burke

2/23/98

CR2E034 (10/97)