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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # P93000065613 (0)

 Corporano 	RATE COMPUTERS, INC.	0000013 (0)				
Principal Place of Business Mailing Address			······································			MINIM BAIMI HAMBA HAH ABDI
12406 SW 9TH PL DAVIE FL 33325 US		12406 SW 9TH PL DAVIE FL 33325-5588 US				
					09/21/1993 04/	ate of Last Report 17/1996
	lace of Business	2a. Mailing Address			4. FEI Number 65-0472137	Applied For
Suite, Apt	# elc	26 Suite, Apt. #, etc.		· · · · · · · · · · · · · · · · · · ·		Not Applicable \$8.75 Additional
22		27			5. Certificate of Status Desired	Fee Required
City & State	3	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Ζιρ •]	Country 25	Zip 29	Coul	ntry	8. This corporation has liability for intangible Florida Statutes	tax under s. 199.032, No
	9. Name and Address of Curi	rent Registered Agent			10. Name and Address of New Registered	Agent
D'ATTILO, KEITH 12408 SW 9TH PL DAVIE FL 33325				81 Name 82 Street Add 83	ress (P.O. Box Number is Not Acceptable)	
				84 City	FL	85 Zip Code
office or r agent if a IGNATURE	egistered agent, or both, in the Standard agent the ob- m familiar with, and accept the ob-			d by the corpora utes. Agent signature requi	· · · · · · · · · · · · · · · · · · ·	
4.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND	
ιŧ	DP PLATTING VEITU	☐ DELETE	1.1 10			Change Addition
ME BELADORESS	D'ATTILO, KEITH 12406 SW 9 PL		1.2 NA 1.3 ST	ME REET ADDRESS		
Y-\$1-ZIP	DAVIE FL			IY-ST-ZIP		
ŀ		, 🗀 DEFELE	21 717	ſ		Change Addition
AE			22 NA		,	
EET ADORESS				REET ADDRESS	, e	
S1-7+		DELETE	2. 4 CI	TY-ST-ZIP		Change Addition
IF.		حين معددات	3.2 NA	-	•	C attaings C ricemon
* ELADORESS				REET ADDRESS		
-St ZiP				TY-ST-ZIP		
		DELETE	4.1 707			Change Addition
:			4. 2 Ni	AME		
ET ADORESS			4.3 ST	REET ADDRESS		
\$1-7IP			4.4 CV	ry-St-zip		
		☐ DELETE	5.1 717	LE		Change Addition
			5.2 NA	ME		
+1 ADDRESS			5.3 ST	REET ADORESS		

St. ZIP

Loo 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 one an attachment with an address.

5.4 CITY - ST - ZIP

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS

TAIATURE

JOHN TURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

4/13/97

954 · 846 · 6329

Change

Addition

FILED

Apr 18 1997 8:00am

Secretary of State

3R2E034 (9/96)