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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED

Apr 21 1997 8:00am

Secretary of State

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DATA COMMUNICATIONS & COMPUTERS CORPORATION

ļ ,					
Principal Place of Business 8657 CENTRAL AVE. 8T. PETERSBURG FL 33713-8339 US		Mailing Address 3857 CENTRAL AVE. ST. PETERSBURG FL 33713-8339 US			
				 Date incorporated or Qualified 11/08/1993 	3a. Date of Last Report 04/19/1996
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number 65-0454772	Applied For
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	Not Applicable \$8.75 Additional
22 City & Stat	Α	City & State			Fee Required
23		28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	Country 30	This corporation has liability for i Florida Statutes	ntangible tax under s. 199,032,] Yes □ No
Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
	WARTZBERG, MICHAEL S		81 Name	CHWARTZBERG,	MICHAET S.
	30TH STREET NORTH PETERSBURG FL 33713		82 Street Add	ress (P.O. Box Number is Not Acceptab	le)
81.1	Elenobung FL 33/13		83	15 AVENUE	MC/H
			84 City		et 7in Codo
			57. A	GESBUR6	FL 85 Zip Code 337/3
11. Pursuant office or r	to the provisions of Sections 607.0503 registered agent, or both, in the State	2 and 607,1508, Florida State of Florida, Such change was	ites, the above-named corp authorized by the corporal	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of changing its registered the appointment as registered
ł	m familiar with, and accept the obliga	itions of, Section 607.0505, F	Torida Statutes.		-
SIGNATURE	Signature, typod or printed name of registered ago		Off: Registered Agent signature regul	rod when reinstaling)	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
TITLE NAME	d Duarte-Penaloza, edgar b	☐ DELETE	1.1 TITLE . 1.2 NAME		Change Addition
STREET ADDRESS	3857 CENTRAL AVE.		1.3 STREET ADDRESS		
CITY-ST-ZIP	ST. PETERSBURG FL		1.4 CITY - ST - ZIP		
TITLE		DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		;
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	2.4 CITY-ST-ZIP 3.1 TILE		Change Addition
NAME		_	3.2 NAME		
STREET ADDRESS			3.3 STREFT ADDRESS		·
CITY-ST-ZIP			3.4. CITY - S1 - ZIP		
TITLE NAME		☐ DELÈTE	4.1 TITLE		☐ Change ☐ Addition
STREET ADDRESS			4. 2 NAME 4.3 STREET ADDRESS		
CITY - \$1 - ZIP			4.4 CITY - ST - ZIP		}
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-\$1-ZIP	1	DELETE	54 CHY-ST-ZIP 61 THLE		Change Addition
NAME		- sercit	6.2 NAME		C ondago C Appointm
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-\$T-ZIP			6.4 CITY-ST-ZIP		
i 14. I do herel	by certify that the information supplied	with this filling does not gua	lify for the exemption stated	d in Section 119.07(3)(i). Florida Statutes	1 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 eath; 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.