

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT #
1. Corporation Name

993000079563
DATAFORCE
Computing, Inc.

Principal Place of Business

Mailing Address

2. Principal Place of Business

2a. Mailing Address

21 8350 NW 52ND TERR
Suite, Apt. #, etc.
22 205
City & State
23 MIAMI FL
Zip
24 33166
Country
25 USA

26 8350 NW 52ND TERR
Suite, Apt. #, etc.
27 205
City & State
28 MIAMI FL
Zip
29 33166
Country
30 USA

3. Date Incorporated or Qualified

3a. Date of Last Report

11/12/93

5/1/96

4. FEI Number

65-0452588

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

10. Name and Address of New Registered Agent

TETLOW, RAY
8350 NW 52ND TERR
SUITE 205
MIAMI 33166

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 607.0502 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's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE C.E.O./P
NAME RAYMOND TETLOW
STREET ADDRESS 10025 NW 46TH ST - 301
CITY - ST - ZIP MIAMI FL 33178
TITLE V.P.
NAME SIMON BAHAD
STREET ADDRESS 9755 NW 52ND STREET - 100
CITY - ST - ZIP MIAMI FL 33178
TITLE V.P.
NAME STEVEN HARVEY
STREET ADDRESS 5454 NW 44TH AVE
CITY - ST - ZIP MIAMI FL 33178
TITLE COMPANY SECRETARY
NAME CAROL TETLOW
STREET ADDRESS 10025 NW 46TH ST - 301
CITY - ST - ZIP MIAMI FL 33178
TITLE V.P.
NAME JIM FURQUERON
STREET ADDRESS 7601 EAST TREASURE DRIVE
CITY - ST - ZIP APT 1917 NTH BAYVIEW FL 33141
TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP
21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP
31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP
41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP
51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP
61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - 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 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 617, 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

CAROL TETLOW

10/23/96 3054710811

Amended Annual Report
FILED

96 OCT 25 AM 8:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CR2E034 (3/96)