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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUMENT # P93000084350 (6)

CELLAR DOOR COMPUTERS, INC.

**FILED** Apr 29 1998 8:00am Secretary of State

Principal Place of Business Mailing Address							itt datet stark minne enter bitt	II <b>48</b> 11 1881
909 N.E. 167T	'H STREET	909 N.E. 167TH	909 N.E. 167TH STREET					
SUITE 502		SUITE 502				DO NOT WRITE IN THIS SPACE		
NORTH MIAMI US	BEACH FL 33162	NORTH MIAMI BEACH FL 33162 US				3. Date Incorporated or Qualified		
US		US	US					
2. Principal Pl	ace of Business	2s. Mailing Add	rass			12/01/1993 4. FEI Number		plied For
21	ace or business	26				65-0452257	<del></del>	t Applicable
Suite, Apt.	* etc		Suite, Apt. #, etc.				40 7E .	
22	.,, 5.6.	27				Certificate of Status Desired	Fee Re	
City & State	)	City & State				6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution	☐ Added t	
Zip Country		Zip Country				8. This corporation owes or has pa	aid the current year Inti	angible
24	25	29	30			Personal Property Tax due June	30. 🔲 Yés 🗀	] No
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Re	gistered Agent	
LEE	BOWITZ, MAURICE			61	Name			l
	N.E. 167TH STREET		62 Stree		Street Add	dress (P.O. Box Number is Not Acceptal	ole)	
	RTH MIAMI BEACH FL 33162					Bot Address (1.0. Box 14011bot is 14017booptable)		
							•	
				84	City		85 Zip (	Code
			<del></del>				FL   S   Z   P	
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 re						aired when reinstating) ADDITIONS/CHANGES TO OFFI	DATÉ	C IN 40
12.	OFFICERS AND			13.	T	ADDITIONS/CHANGES TO OFFI	CENS AND DIRECTOR	Addition
TITLE	D LEDONATA MANDIOE			1.1 TITLE			CT CHAING	
NAME	LEBOWITZ, MAURICE			1.2 NAME				
STREET ADDRESS	909 N.E. 167TH STREET	00		1.3 STREET				
CITY-ST-ZIP	NORTH MIAMI BEACH FL 331			1.4 CITY - S 2.1 TITLE	T-ZIP		Change	Addition
TITLE	D D	L					onengo	
NAME	SHITEYNBERG, BORIS			22 NAME	ADDDECC			
STREET ADDRESS	909 N.E. 167TH STREET	00		2.3 STREET				
CITY-S1-ZIP	NORTH MIAMI BEACH FL 331			2. 4 CITY - 9	ST - ZIP	·	Change	Addition
TITLE		ں رے		3.1 TITLE 3.2 NAME	1		orange	
NAME DEDECT ADDRESS					ADDOCCO			İ
STREET ADDRESS				3.3 STREET				
CITY-ST-ZIP				3.4. CHY-5 4.1 TITLE	01-ZP		Change	Addition
TITLE		ن ن		4. 2 NAME				Sand Fradricks
NAME CONCEST ADDRESS				4.2 NAME 4.3 STREET	ADDRESS			
STREET ADORESS								ł
CITY-ST-ZIP	<del></del>	F"] r		4.4 CITY-S 5.1 TITLE	1-212		Change	Addition
TITLE		ı					ELL ORBING	
NAME				5.2 NAME	**************************************			
STREET ADDRESS				5.3 STREET				
CITY - ST - ZIP		Пг		54 CITY-S 61 TITLE	1-219		☐ Change	Addition
TITLE	•	L_1 +		6.2 NAME	1			
NAME					1000000			
STREET ADDRESS				6.3 STREET				
CITY-ST-ZIP	artify that the information supplied wi	th this filing does no		6.4 CITY+S		n Section 119.07(3)(i), Florida Statutes.	further certify that the	information

indicated on this annual report or supplied with this mind does not dealing to the 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: