## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P94000001489

Entity Name: S.E.G. COMPUTERS & PERIPHERALS, INC.

FILED Apr 29, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

10200 NW 25TH ST 8200 NW 27TH ST UNIT 111 UNIT 112 MIAMI, FL 33172 8200 NW 27TH ST UNIT 112 MIAMI, FL 33172

Current Mailing Address: New Mailing Address:

 10200 NW 25TH ST
 8200 NW 27TH ST

 UNIT 111
 UNIT 112

 MIAMI, FL 33172
 MIAMI, FL 33172

FEI Number: 65-0457903 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GIL, MARGARITA
10200 NW 25TH ST UNIT 111
MIAMI, FL 33172 US
GIL, MARGARITA
8200 NW 27TH ST
112
MIAMI, FL 33172 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MARGARITA GIL 04/29/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete

Name: GIL, SIMON E

Address: 10200 NW 25TH ST. UNIT 111

City-St-Zip: MIAMI, FL 33172

Title: VSTD ( ) Delete Name: GIL, MARGARITA

Address: 10200 NW 25TH ST. UNIT 111

City-St-Zip: MIAMI, FL 33172

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition

Name: GIL, SIMON E

Address: 8200 NW 27TH ST SUITE 112

City-St-Zip: MIAMI, FL 33172

Title: VSTD (X) Change ( ) Addition

Name: GIL, MARGARITA

Address: 8200 NW 27TH ST SUITE 112

City-St-Zip: MIAMI, FL 33172

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIMON E GIL P 04/29/2005