

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. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000030924 (2)

1. Corporation Name

HIBISCUS COMPUTER CONSULTING, INC.



Principal Place of Business

Mailing Address

~~7515 S.W. 5TH ST.~~
~~NORTH LAUDERDALE FL 33068~~

~~7515 S.W. 5TH ST.~~
~~NORTH LAUDERDALE FL 33068~~

2139 UNIVERSITY DRIVE, Suite 230
CORAL SPRINGS, FL 33071

3. Date Incorporated or Qualified

04/22/1994

3a. Date of Last Report

03/14/1995

4. FEI Number

65-0488624

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

2. Principal Place of Business

2a. Mailing Address

21 2139 UNIVERSITY DR

26 2139 UNIVERSITY DR

Suite, Apt. #, etc

Suite, Apt. #, etc

City & State

City & State

23 CORAL SPRINGS FL

28 CORAL SPRINGS

Zip

Country

Zip

Country

24 FL

25 USA

29 FL

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BRIJMOHAN, DEVANAND

~~7515 S.W. 5TH ST.~~

~~NORTH LAUDERDALE FL 33068~~

2139 UNIVERSITY DR, Suite 230
CORAL SPRINGS FL 33071

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 signature required when terminating.)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

D

☐ DELETE

NAME

BRIJMOHAN, DEVANAND

STREET ADDRESS

~~7515 S.W. 5TH ST.~~

CITY - ST - ZIP

~~NORTH LAUDERDALE FL 33068~~

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/23/96 9543456034

CR2E034 (3/96)