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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P94000034760 (6) DOCUMENT

DELTA INTERNATIONAL COMPUTERS, INC.

Principal Place of Business Mailing Address 6702 BENJAMIN RD 6702 BENJAMIN RD STE 600 **STE 600** DO NOT WRITE IN THIS SPACE TAMPA FL 33634 TAMPA FL 33634 3. Date Incorporated or Qualified 05/05/1994 2. Principal Place of Business 2a. Mailing Address 4. FE! Number Applied For 59-3243710 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 30 Personal Property Tax due June 30. Yes. 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 SOLGOT, RICHARD S 6805 S ENGLEWOOD AVE 82 Street Address (P.O. Box Number is Not Acceptable) TAMPA FL 33611 83 84 City 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 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE Change Addition NAME SOLGOT, RICHARD S 1.2 NAME 6805 S ENGLEWOOD AVE STREET ADDRESS 1.3 STREET ADDRESS TAMPA FL 33611 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE SOLGOT, MEI H 2.2 NAME 6805 S ENGLEWOOD AVE 2.3 STREET ADDRESS STREET ADDRESS TAMPA FL 33611 2. 4 CITY-ST-ZIP CITY-ST-ZiP DELETE Change Addition TITLE SOLGOT, RANDY L 3.2 NAME NAME 6805 S ENGLEWOOD AVE 3 3 STREET ADDRESS STREET ADDRESS TAMPA FL 33611 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 4.1 TITLE TITLE SOLGOT, STEVEN R 4. 2 NAME 6805 S ENGLEWOOD AVE 4.3 STREET ADDRESS STREET ADDRESS **TAMPA FL 33611** CITY - ST - ZIP 4,4 CITY - ST - ZIP DELETE Change Addition TITLE 51 TITLE 5.2 NAME NAME STREET ADDRESS 5,3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP ■ DELETE Change Addition 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP CITY - ST - 21F

Block 12 or Block 13 if changed, or on an attachment with an address 1-16-98 SIGNATURE:

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 cath; 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

FILED

Jan 28 1998 8:00am

Secretary of State