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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9400034760

Corporation Name

Principal Place of Business

DELTA INTERNATIONAL COMPUTERS, INC.

## FILED Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90029 019 \*\*\*150.00



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34	TAMPA FL 33634			DO NOT WRITE IN THIS SPACE		
	US			3. Date Incorporated or Qualifed 05/05/1994		
lace of Business	2a. Mailing Address	<del></del>		4. FEI Number . Applied For		
	26			<b>59-3243710</b> Not Applica		
#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired   \$8.75 Additional Fee Required		
e	City & State			6. Election Campaign Financing S5.00 May Be		
	28			Trust Fund Contribution Added to Fees		
Country	Zip	Countr	у	8. This corporation owes the current year Intangible		
25	29	10		Personal Property Tax. ☐ Yes ☐ No		
9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent		
007 BIOLIABO 0		8	1 Name			
· - · / · · · · · · · · · · · · · · · ·		8	2 Street	t Address (P.O. Box Number is Not Acceptable)		
6805 S ENGLEWOOD AVE		6	Jucet	( Augusto ( A. Dox Humber to Not Avvehable)		
PA FL 33611		8:	3			
		L	<u> </u>			
		8	4 City	FL 85 Zip Code		
to the provisions of Sections 607 0502	and 607 1508. Florida Statutes	the abo	_i ve-named			
egistered agent, or both, in the State o	of Florida. Such change was aut	horized b	y the corp	poration's board of directors. I hereby accept the appointment as registered		
m familiar with, and accept the obligati	ions of, Section 607.0505, Florid	da Statute	s.			
A	MOTE C			required when reinstation)		
			erit signature	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
				Change ☐ Add		
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•				1 6622 Thomas 1 1 0		
				6532 Theroughbred Loop		
			ST-ZIP	ODESSA FL 33556		
	T] DETEIF	4		Mage ☐ Add		
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6805 S ENGLEWOOD AVE		2.3 STREE	ET ADDRESS	6532 Thoraugh bied Loup		
TAMPA FL 33611		2. 4 CITY	ST-ZIP	ODESSA, FL 33556		
VD	☐ DELETE	3.1 TITLE		<b>⊠</b> Change ☐ Add		
SOLGOT, RANDY L		3.2 NAME				
6805 S ENGLEWOOD AVE		33 STREE	ET ADDRESS	6532 Thoroughbred Loup		
TAMPA FL 33611		3.4. CITY-	ST-ZIP	odessa FL 33556		
SD	☐ DELETE	4.1 TITLE		M Change ☐ Add		
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				6532 Thorough bred Lesp		
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	LJ DECETE	Ł		☐ Change ☐ Add		
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		6.3 STREE	ET ADDRESS			
		6.4 CITY-	ST-ZIP			
	Country  25  9. Name and Address of Current GOT, RICHARD S S ENGLEWOOD AVE PA FL 33611  To the provisions of Sections 607.0502 egistered agent, or both, in the State of ramiliar with, and accept the obligation of Sections 607.0502 egistered agent, or both, in the State of familiar with, and accept the obligation of Sections 607.0502 egistered agent, or both, in the State of familiar with, and accept the obligation of FICERS AND SOLGOT, RICHARD S 6805 S ENGLEWOOD AVE TAMPA FL 33611  VD SOLGOT, RANDY L 6805 S ENGLEWOOD AVE TAMPA FL 33611	STE 600 TAMPA FL 33634 US  lace of Business  2a. Mailing Address 26  #, etc.  Suite, Apt. #, etc.  27  28  Country  25  29  9. Name and Address of Current Registered Agent  GOT, RICHARD S S ENGLEWOOD AVE PA FL 33611  To the provisions of Sections 607.0502 and 607.1508, Florida Statutes agistered agent, or both, in the State of Florida. Such change was aut in familiar with, and accept the obligations of, Section 607.0505, Florid Signature, typed or printed name of registered agent and title if applicable.  OFFICERS AND DIRECTORS  PD  SOLGOT, RICHARD S 6805 S ENGLEWOOD AVE TAMPA FL 33611  TD  DELETE  SOLGOT, MEI H 6805 S ENGLEWOOD AVE TAMPA FL 33611  VD  DELETE  SOLGOT, RANDY L 6805 S ENGLEWOOD AVE TAMPA FL 33611  SD  DELETE  SOLGOT, STEVEN R 6805 S ENGLEWOOD AVE	STE 600 TAMPA FL 33634 US    Country	STE 600 TAMPA FL 33634 US  ace of Business  2a. Mailing Address 25  3citte. Apt. #, etc.  27  2a. Mailing Address 26  Suite. Apt. #, etc.  27  2a. Suite. Apt. #, etc.  27  2a. City & State 2a. Suite. Apt. #, etc.  27  29  30  9. Name and Address of Current Registered Agent  30T, RICHARD S S ENGLEWOOD AVE PA FL 33611  83  84 City  100 the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-name agistered agent, or both, in the State of Florida. Such change was authorized by the corn familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  Signature, typed or printed name of repatered agent and title if applicable.  OFFICERS AND DIRECTORS  PD  OFFICERS AND DIRECTORS  13.  PD  OFFICERS AND DIRECTORS  13.  PD  OFFICERS AND DIRECTORS  14. CITY-ST-ZIP  SOLGOT, RICHARD S 6805 S ENGLEWOOD AVE TAMPA FL 33611  TD  OELETE  2.1 TITLE 2.2 NAME 2.3 STREET ADORESS TAMPA FL 33611  VD  OELETE 3.1 TITLE 3.2 NAME 3.3 STREET ADORESS TAMPA FL 33611  DELETE 4. CITY-ST-ZIP  SOLGOT, STEVEN R 6805 S ENGLEWOOD AVE TAMPA FL 33611  OELETE 5.1 TITLE 5.2 NAME 5.3 STREET ADORESS 5.4 CITY-ST-ZIP 5.3 TITLE 5.3 NAME 5.3 STREET ADORESS 5.4 CITY-ST-ZIP 5.4 CITY-ST-ZIP 5.4 CITY-ST-ZIP 5.5 TITLE 5		

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 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, with all other like empowered.

MATURE: Signature AND Types or Printed NAME of Systiming Officer or Director

Date

Date

Date

Day director

CR2E034 (11/98)