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

PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

TITLE

NAME

TITLE NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000045361 (0)

BRANDON SMITH COMPUTERS, INC.

Principal Place of Business Mailing Address 745-E BEAL PKWY NW 745 E BEAL PKWY NW UNIT 3 UNIT 3 FT WALTON BEACH FL 32547 DO NOT WRITE IN THIS SPACE FT WALTON BEACH FL 32547 US 3. Date Incorporated or Qualified 06/13/1994 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-3252219 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip B. This corporation owes or has paid the current year Intangible ☐ Yes Personal Property Tax due June 30. 24 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent SMITH, TINA G 81 Name 486 PARISH BLVD. Street Address (P.O. MARY ESTHER FL 32569 83 84 City Zip Code 602 and 607. 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered are of Florida. Such an appointment as registered that it is section in 17.2505, Florida Statutes. 11. Pursuant to the provising office or registered agent, or both, in the **SIGNATURE** (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change Addition DELETE 1.1 TITLE TITLE SMITH, BRANDON J NAME 1.2 NAME 486 PARISH BIVE 721 MARY AVE 1.3 STREET ADDRESS STREET ADDRESS FT WALTON BEACH FL 32547 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change ☐ Addition 2.1 TITLE TITLE **SMITH, TINA G** 2.2 NAME NAME 486 PARISH BIVE 721 MARY AVE 2.3 STREET ADDRESS STREET ADDRESS FT WALTON BEACH FL 32547-2424 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADORESS 3.3 STREET ADDRESS

64CITY-ST-ZIP

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 oath; that I am an officer or director of the corporation of 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 or an attachment with an address.

3.4. CITY-ST-ZIP

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

4.1 TITLE

4.2 NAME

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELET**e**

M-22-98 (85N)864-244

☐ Change

Change

Change

Addition

Addition

Addition

FILED

Mar 05 1998 8:00am

Secretary of State