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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000058861 (3)

RICHARDS COMPUTER, INC.

8768 S.W. 72ND STREET	8768 S.W. 72ND STREET	
Principal Place of Business	Mailing Address	***********

FILED Jan 28 1997 8:00am Secretary of State



8768 S.W. 72ND STREET MIAMN FL 33173		8768 S.W. 72ND STREE MIAMN FL 33173-3512	8788 S.W. 72ND STREET MIAM FL 33173-3512								
						3. Date Incorporated or Qualified					
2. Principal P	lace of Business	2a. Mailing Address				4.	. FEI Number		Ť	-	olied For
21		26				. _	65-0511020			Not	Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.					. Certificate of Status Desired		\$8.7	75 A	dditional
22		27				٠,	. Certificate of Status Desired		Fe	e Re	quired
City & State	e e	City & State				6.	Election Campaign Financing				May Be
23		28				 -	Trust Fund Contribution				Fees
Zip	Country	Ζφ	Cour	ntry		8.	. This corporation has liability for			ler s.	199.032,
24	25	29	30				Florida Statutes	Yes	_		
	g. Name and Address of Curre	nt Hegistered Agent		81	Name	10.	Name and Address of New Re	Grateled \	Agent		
	, JOHN R.			"	INAME						
	8 S.W. 72ND STREET		Ì	82	Street Addr	ress (F	P.O. Box Number is Not Acceptab	ile)		-	
MIA	MI FL 33173		-	83							
			Ì	83							
			t	84	City		***************************************		85	Zip C	ode
	to the provisions of Sections 607 050				<u> </u>			<u>FL</u>			
12.		ID DIRECTORS	13.		nt signature requi		n reinstating) ADDITIONS/CHANGES TO OFFIC	DATE CERS AND			
TTEF	PD	☐ DELETE	1.1 1)[LE					Chai	nge	Addition
NAME	ALE, JOHN R		1.2 NA	ME							
STREET ADDRESS	1205 KELLY ST SW		1.3 ST	REET	ADDRESS						
CITY ST ZIP	VIENNA VA		1.4 CIT		T-ZIP				<u> </u>		1 1 1 1 1 1 1 1
TITLE	VPD	L_ DELETE	2.1 Tit						Cha	пре	Additio
NAME	NEWMAN, WILLIAM A		22 NA								
STREET ADDRESS	1502 SCADIA CIR		1		ADDRESS		:1	٠,			
C Tr - S1 - ZiP	RESTON VA	DELETE	2. 4 CI	_	57 - ZIP				☐ Chai		Additio
TIFLE	'-	☐] DETEIE	3.1 117						L. UIR	មេដូច	LJ Maulio
NAME	ALE, STEPHEN C 8307 FOX HARROW LANE		3.2 NA		1805500						
STREET ADDRESS	ANNANDALE VA				ADDRESS						
CITY - ST - ZIP	S S	DELETE	34 CI 4.1 TIT		ST-ZIP			·	Cha	nae	Additio
TILE	O'DONNELL, MICHAEL J									μβe	Auditio
NAME	1501 LINCOLN DRIVE		4.2 NA								
STREET ADDRESS	MCLEAN VA				ADDRESS						
CITY ST-7IP	MOLENI IA	DELETE	4.4 CiT		I-ZIP				The	nne	☐ Additio
TIFLE Note:		L DEFETE	51 TH						المانيا بي	nige	, AUUIUU
NAME.)		52 NA		ADODCCC						
STREET ADORESS					ADORESS						
CHY-ST-ZIF		DELETE	5.4 CIT	******	1 - ZIP	··			☐ Cha	0/10	Additio
MILE	(ריין טנוננונ	6.1 7(7						018	ii iAg	LT MODICIO
NAME			6.2 NA								
STREET ADDRESS			6.3 ST	KEET	ADDRESS						

14. I do 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

SIGNATURE

SOUND PUR LINE OF SIGNING OFFICER OR DIRECTOR

John Richard Ale

1-20-97

305-598-7795

Phone #

CR2E034 (9/96