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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

P94000064058 (8)

COMPUTER INTERNATIONAL CORPORATION

Principal Place of Business Mailing Address						4 I Marithar 114 (A) II BIDH ADHI ADHI ADHI ADHA ADHA AINN AINN AINN ANN ANN I ANN I ANN I ANN I ANN I ANN I A					
3040 NW 72ND AVE MIAMI FL 33122			3040 NW 72ND AVE MIAMI FL 33122								
[DO NOT V	VRITE IN THIS	SPACE	
ĺ								3. Date incorporated or Qual	fied		
								08/30/1994			
	Place of Business	20	. Mailing Address					4. FEI Number		L	Applied For
21								65-0537831			Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.					5. Certificate of Status Desire	d \square		5 Additional
22		27									Required
City & State			City & State					6. Election Campaign Financ		7	00 May Be
23		28	Zip	1 0-				Trust Fund Contribution			ed to Fees
Zip 24	Country		Zip	_	untry	y		8. This corporation owes or h		-	
24 25 29 30 30 9. Name and Address of Current Registered Agent					_			Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent			
			stered Whelit		81	Na	me	IV. Name and Address of the	w megistered	Agont	
l .	NUERREIRO-MARTINS, HELENA I				Ľ.					_	
19464 NE 26TH AVENUE UNIT #24					82	Str	eet Addre	ess (P.O. Box Number is Not Acc	eptable)		•
NORTH MIAMI BEACH FL 33180					83						
					"						
					84	City	Y		FL	85 Z	ip Code
44 5	10 10 10 10 10 10 10 10 10 10 10 10 10 1	01 6	207 4500 51-13- 60-1			<u> </u>					- 34
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State	of Flori	da. Such change was	authoriza	nd ha	v the i	nea corpo corporatio	oration submits this statement for on's board of directors, I hereby	the purpose o	or changin pointment	g its registered as registered
agent. I a	m familiar with, and accept the oblig	alions o	f, Section 607. 0505, Fl	orida Sta	atutes	S.		•	, ,	'	•
SIGNATURE			1	rc D					DATE		
12.	Signature, typed or printed name of registered age OFFICERS AN			L: Hegister	<u> </u>	ent sign	ature require	d when reinstating) ADDITIONS/CHANGES TO		O DIDECT	ODC IN 12
TITLE	P	DUIL	DELETE		TITLE			ADDITIONS/CHANGES TO	DEFICENS AN	☐ Chang	
NAME	GUERREIRO-MARTINS, HEL	ENA E			NAME						,
40.40.4 100 4001 1100 1100 1104						. 4 0000					
STREET ADDRESS	MIAMI FL 33180	7 4 7				ADDRE	55				
CITY-ST-ZIP TITLE	V/P		DELETE	_	CITY-S	51 - ZIP				Chang	ne 🔲 Addition
NAME	GUERREIRO-MARTINS, JOS	F			NAME		- 1				,
STREET ADDRESS	19464 N E 26TH AVENUE	L				ADDRE	ee l		, in		
CITY-ST-ZIP	MIAMI FL 33180					ST-ZIP	35				
TITLE	MILLONI I E OG TOD	· · · · · · · · ·	DELETE		TITLE	31 - ZIP				☐ Chanc	e Addition
NAME					NAME						- tond - tou.troll
STREET ADDRESS						ADDRE	ر ا				
CITY-ST-ZIP						ST-ZIP	~				
TITLE			DELETE		TITLE	31.74P		······································		☐ Chang	e
NAME					NAME						,
ATOUT LABORES				100		LANDE	<u>,, </u>				

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 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.

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

CICNATURE.

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME

TITLE

NAME

Cot Cilla otion Com

DELETE

DELETE

01.26 98

Change

Change

Addition

☐ Addition

FILED

Feb 18 1998 8:00am

Secretary of State