FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

Principal Place of Business

P94000078084 (8) DOCUMENT #

COMPUTEK ENTERPRISES (U.S.A.), INC.

Mailing Address

FILED Apr 19 1996 8:00 am Secretary of State



9206 NW 10 MEDLEY FL		9206 NW 106 ST MEDLEY FL 33178		3. Date Incorporated or Qualified 10/25/1994	3a. Date of Last Report 05/01/1995
2. Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number 650569811	Applied For
21 10470	N.W. 26 STREET	²⁶ 10470 N.W.	26 STREET	APPLIED FOR	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.	TO DIMINI	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	е	City & State	· · · · · · · · · · · · · · · · · · ·	6. Election Campaign Financing	
23 MIAMI	, FL	28 MIAMI, FL		Trust Fund Contribution	S5.00 May Be Added to Fees
Zip	Country	Zφ	Country	8. This corporation has tiability for i	
24 33172	9. Name and Address of Curre	29 33172	30 USA		□No
	9. Name and Address of Curre	nt Hegistered Agent	81 Name	10. Name and Address of New R	egistered Agent
9206 N	CA, OSCAR W 106 ST Y FL 33178		82 Street 701 83	C REGISTERED AGENTS Address (P.O. Box Number is Not Acceptab BRICKELL AVENUE TE 2000	85 Zip Code
familiar wit	th, kind agrept the obligations of, So	ion 607.0505, Florida Statum kana tite 4 applicab	es, the above named code by the corporation's	orporation submits this statement for the purpose and of directors. I hereby accept the appointment of the purpose when reinstating.	pose of changing its registered office pintment as registered agent. I am 3/29/96
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1. 1 TITLE	D	Change
NAME Overst veneral	DAGACH, PATRICIO		1.2 NAME	DAGACH, PATRICIO	
STREET ADDRESS	9206 NW 106 ST		1.3 STREET ADDRESS	10470 N.W. 26 STREET	
CITY-ST-ZIP TITLE	MEDLEY FL 33178	בם מני בני	14 CITY - ST - ZIP	MIAMI, FLORIDA 33172	
NAME	D DATE PORTO	DELETE .	2 1 TITLE	D	Change Addition
STREET ADDRESS	BAEZA, ROBERTO		22 NAME	BAE3A, ROBERTO	
CITY-ST-ZIP	9206 NW 106 ST		2.3 STREET ADDRESS	10470 N.W. 26 STREET	
TILE	MEDLEY FL 33178	▼] DELETE	2.4 CITY - ST - ZIP 3. 1 TITLE	MIAMI, FLORIDA 33172	
NAME	FONSECA, OSCAR	A J DELETE	3.2 NAME	JOHNSON, CARLOS	Change 🔣 Addition
STREET ADDRESS	9206 NW 106 ST				*D.
CITY-ST-ZIP	MEDLEY FL 33178		3 3. STREET ADDRESS		ABA
TITLE	MEDLET PL 351/6	☐ DELETE	34 CHTY-ST-ZIP 4 1 THTLE	SANTIAGO, CHILE	
NAME		L) beerie	4.2 NAME		Change Addition
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-S1-ZIP					
TITLE		DELETE	4.4 CITY - ST - ZIP 5. 1 TITLE		Change C Addition
NAME			5.2 NAME		Change Addition
STREET ADDRESS					
CITY-S1-ZIP			5 3 STREET ADDRESS		
TITLE		☐ DELETE	5 4 CITY-ST-ZIP 6 1 TITLE		El Conno
NAME		C) been			Change Addition
STREFT ADDRESS			62 NAME		
ì			6.3 STREET ADDRESS		
CITY-ST-ZIP	contifuthat the information expelled	Al-Al-	6.4 CITY-ST-ZIP		

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

DIRECTOR

3/28/96

(305) 597-0029