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 # P94000081205 (4)

PERSONAL COMPUTER TRAINING, INC.

| Principal Place of Business Mailing Address | | | | | | s consider ein (ben Ason mine beier de | iii anibi ikidi | SALE ILBIT ERIÐI | f Aftramer |
|---|---|---|---------------------------|--------------|--|--|-----------------|---------------------------------------|-----------------|
| 3338 ATLANTIC BLVD. JACKSONVILLE FL 32207 3338 ATLANTIC BLVD. JACKSONVILLE FL 32207-8983 | | | | | | | | | |
| | | | | | 3. | Date Incorporated or Qualified | 3a. Da | te of Last R | eport |
| | | | | | | 11/04/1994 | 02/0 | 01/1996 | |
| 2. Principal Pl | ace of Business | 2a. Mailing Address | Mailing Address | | | FEI Number | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | oplied For |
| 21 26 | | | | | | 59-3277716 | | | ot Applicable |
| Suitc. Apt # etc Suite, Apt. #, etc | | | | | 5. | Certificate of Status Desired | | \$8.75 A | |
| City & State | · | City & State | City & State | | | Election Campaign Financing | | · | ···· |
| 23 | | 28 | ٦ ΄ | | | Trust Fund Contribution | П | \$5.00 Added t | |
| Zip | Country | Zip | Country | 1 | 8. | This corporation has liability fo | r intangible | | |
| 24 | 25 | 29 | 30 | | | | ☐ Yes [| | |
| | 9. Name and Address of Currer | ıt Registered Agent | | , | | Name and Address of New F | egistered / | agent | |
| | USO, SUSAN W | | 81 | Name | ſ | | | | |
| 3338 ATLANTIC BLVD. | | | | Street | reet Address (P.O. Box Number is Not Acceptable) | | | | |
| JACKSONVILLE FL 32207 | | | | | | | | | |
| | | | 83 | | | | | | |
| | | | 84 | City | | | 17-1 | 85 Zip (| Code |
| | to the provisions of Sections 607.050 | | | l | | | <u>FL</u> | | |
| SIGNATURE | Signative type I in protest range of regions of an | smarkt theid application (NOTE | Registered Ag | ent signatur | e required when | reinstating) ADDITIONS/CHANGES TO OFF | DATE | DIRECTOR | 99 IN 12 |
| TILE | P | DELETE | 1.1 HILE | | | REDITTORIS/CITA/TOLD TO GIT | OLI IO NIAL | Change | Addition |
| NAM: | CARUSO, SUSAN W | | 1.2 NAME | | 1 | | | | |
| STREET ADDRESS | 3338 ATLANTIC BLVD. | | 1 | T ADDRESS | | | | | |
| City - St - ZiP | JACKSONVILLE FL 32207 | | 1.4 CITY- | | | | | | |
| THILE | VP | ₩ OELETE | 2.1 TITLE | | UP, S | · · · · · · · · · · · · · · · · · · · | | ☐ Change | Addition |
| NAME: | CARUSO, JOHN D. | , | 2.2 NAME | | Adnar | Greenhyt Attackie Blod | | | |
| STREET ADDRESS | 3338 ATLANTIC BLVD | | 2 3 STREE | T ADDRESS | 3338 | Atlantic City | | | |
| CHTY - ST - ZIP | JACKSONVILLE FL | | 2 4 CITY | ST-ZIP | Jack | sonville FL 32 | 207 🕆 | | |
| TITLE | | ☐ DELETE | 3 1 TITLE | | , | | | Change | Addition |
| NAM i. | | | 32 NAME | | | | | | |
| STREET ADDRESS | | | 3 3 STREE | T ADDRESS | | | | | |
| CITY ST 7IP | | DELETE | 3 4. CITY | ST-ZIP | ļ | | | Change | Addition |
| TIFLE | | F" DETELE | 4.1 TITLE | | | | | T CHANGE | AUDICUIT |
| NAME Clark LANDERS | | | 4. 2 NAME | T ADDRESS | | | | | |
| STHE: LADDRESS | | | | | | | | | |
| City-St-ZP Title | | DELETE | 4.4 CITY - 5.1 TITLE | 51-211 | · | | | Change | Addition |
| NAME | | | 5.2 NAME | | | | | • | _ |
| STREET ADDRESS | | | | T ADDRESS | | | | | |
| CITY-ST 20P | | | 5.4 CITY - | | | | | | |
| TITLE | | DELETE | 6.1 TITLE | | | | | Change | Addition |
| NAME | | | 6.2 NAME | | | | | | |
| STHELT ADDRESS | | | 63 STREE | T ADDRESS | | | | | |
| CITY+ST-ZIP | | ************************************** | 6 4 CiTY- | | | | | | |
| informatio Lamian o | by certify that the information supplic or indicated on this annual report or a ficer or director of the corporation of the Block 12 or Block 13 if changed, o | supplemental annual report is tr ir the receiver or trustee emnowi | ue and acc ered to exe | urate and | id that my si | ignature shall have the same le | gal effect as | s if made un | ider oath; thai |

SIGNATURE:

FILED

Jan 24 1997 8:00am

Secretary of State