

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 21 AM 9:02

DOCUMENT # P94000089524 (0)

1. Corporation Name

COMPU CONCEPTS INC.

Principal Place of Business

7935 SW 17 STREET
MIAMI FL 33155

Mailing Address

7935 SW 17 STREET
MIAMI FL 33155

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/09/1994

3a. Date of Last Report

4. FFI Number

65-0542325

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 8000 NW 31 street

State, Apt. #, etc.

22 11

City & State

23 MIAMI FL

Zip

24 33122

25

Country

2a. Mailing Address

26 8000 NW 31 street

State, Apt. #, etc.

27 11

City & State

28 MIAMI FL

Zip

29 33122

30

Country

9. Name and Address of Current Registered Agent

GALLETTI, JULIO A
7935 SW 17 STREET
MIAMI FL 33155

10. Name and Address of New Registered Agent

81 Name

Claudia Garcia F.

82 Street Address (P.O. Box Number is Not Acceptable)

8000 NW 31st Street

83 Suite

11

84 City

MIAMI

FL

85 Zip Code

33122

11. Pursuant to the provisions of Sections 605.0602 and 605.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, to take effect in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and consent, to the provisions of Sections 605.0602 and 605.1508, Florida Statutes.

SIGNATURE

[Signature]

Director

2/17/95

12. OFFICERS AND DIRECTORS

1. NAME	D
2. NAME	GARCIA, CLAUDIA
3. STREET ADDRESS	7935 SW 17 STREET
4. CITY & STATE	MIAMI FL 33155
5. NAME	
6. NAME	
7. STREET ADDRESS	
8. CITY & STATE	
9. NAME	
10. NAME	
11. STREET ADDRESS	
12. CITY & STATE	
13. NAME	
14. NAME	
15. STREET ADDRESS	
16. CITY & STATE	
17. NAME	
18. NAME	
19. STREET ADDRESS	
20. CITY & STATE	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	Change ☒ Addition ☐
2. NAME	P. Garcia, claudia
3. STREET ADDRESS	8000 NW 31 street suite 11
4. CITY & STATE	MIAMI FL 33122
5. TITLE	Change ☐ Addition ☐
6. NAME	
7. STREET ADDRESS	
8. CITY & STATE	
9. TITLE	Change ☐ Addition ☐
10. NAME	
11. STREET ADDRESS	
12. CITY & STATE	
13. TITLE	Change ☐ Addition ☐
14. NAME	
15. STREET ADDRESS	
16. CITY & STATE	
17. TITLE	Change ☐ Addition ☐
18. NAME	
19. STREET ADDRESS	
20. CITY & STATE	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption subject to Section 111.02(2)(c), Florida Statutes. I further certify that the information and data on this annual report or supplementary financial 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, and that my signature is required by Chapter 605, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report as a registered agent or director.

SIGNATURE:

[Signature]
SIGNATURE AND PRINTED NAME OF SIGNING OFFICIAL ON FORM 9501

1/31/95

305 631 9655