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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE. Sandra B. Mortham Secretary of State

1996

DIVISION OF CORPORATIONS P94000089890 (5)

DOCUMENT #

PARTNERS IN COMPUTING, INC.

Principal Place of Business

Mailing Address

378 PATIO VILLAGE TERR. FT LAUDERDALE FL 33326

P.O. BOX 16844



	ISPACE I E SUGEO	FI. ENUDERDALE FE	33320			
					3. Date Incorporated or Qualified 12/12/1994	3a. Date of Last Report 10/20/1995
 Principal Pla 1522 		2a. Mailing Address			4. FEI Number 65-0563271	Applied For Not Applicable
Suite, Apt. #, etc. Suite. Apt. #, 27			etc		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State 23 FORT	I am more and the El	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24 333	26 25 L/S A	Zφ 29	Count	ry	8. This corporation has liability for in Florida Statutes	ntangible tax under s 199.032,
	9. Name and Address of Current Re	gistered Agent			10. Name and Address of New Re	egistered Agent
			8	1 Name		<u> </u>
REECK, AMY R 200 E LAS OLAS BLVD SUITE 1800 FT LAUDERDALE FL 33301			8:	62 Street Address (P.O. Box Number is Not Acceptable)		
			8:	3		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	DETIDALE I E GOOD I		8	4 City		E1 85 Zip Code
	o the provisions of Sections 607,0502 and of agent, or both, in the State of Florida 6 in, and accept the obligations of, Section 6		s, the above d by the cor	named corpo poration's boa	ration submits this statement for the purp and of directors. I hereby accept the appo	lose of changing its registered offici intment as registered agent. I am
	Signature: typic flor printeu name of registered amendantiti	enifają krabi († 1817)	t Pageted Ag	ent signation, require	5d when repistate gi	DATE
12.	OFFICERS AND DI	RECTORS	13.		ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12
TITLE	DPS	☐ DELETE	1 1 THE	7		Change Addition
NAME	LIPPMAN, DREW		1.2 NAME			
STREET ADDRESS	378 PATIO VILLAGE TERR.		13STREE	T ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL 33326		1.4 CiTY -	ST-ZIP		
THLE	DVT	DELETE	2 1 T TLE		V	Change Addition
NAME	LIPPMAN, DIANE		2.2 NAME			
STREET ADDRESS	378 PATIO VILLAGE TERR.		2.3 STREE	-LADORESS		
CITY-ST-ZIP	FT LAUDERDALE FL 33326		2.4 OITY -	ST - ZIF		
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NAME			3.2 NAME			
STREET ADDRESS			3.3 STRE	EL ADDRESS		
CITY - ST - ZIP			3.4 CITY -	\$1 - 7IP		
TITLE	· · · · · · · · · · · · · · · · · · ·	DELETE	4 1 TITLE			Change Addition
NAME			4.2 NAME			
STREET ADDRESS			4.3 STHEE	LADDRESS		
City - St - ZiP			4.4 CITY -	ST-ZIP		
TITLE		☐ DELFTE	5 1 TITLE			Change Add tion
NAME			5.2 NAME			<u> </u>
STREET ADDRESS			5.3 STREE	T ADDRESS		
CITY-ST-2IP			5.4 CHY-			
TITLE		DELFTE	6 1 HILE			Change Addition
NAME			6.2 NAME			
STREET ADORESS				T ADDRESS		
CITY - S1 - ZIP			6.4 CiTY -:			
14. I do hereby	certify that the information supplied with t	his filing is voluntarily furnis	hed and doc	es not quality for	or the exemption stated in Section 119.0	7/2VIII Florido Statutos 16 duas

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.

IRRMAN PRESIDES

4/24/96 954 389-9431