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

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95(

P95000002772 (8)

RTE COMPUTERS, INC.

APPROVED AND FILED

96 SEP -9 PM 3: 11

SECRETARY OF STATE TALLAHASSEF, FLORIDA

i nii s	JOHN OTERIO, INC.			1	
Frincipar Place	e of Business	Manag Address			TT 18 DE LA BODIN BODIN ODDIN DIQUE DE BRE HOUD RADE HOU
7841 SOUTHWEST ISONO AVENUE, UNIT 6		7841 SOUTHWEST 152NO AVENUE. UNIT 6 MIAMM FL 20183			
				3. Date Incorporated or Quali 01/11/1995	fied 3a. Date of Last Report
	ace of Business 8/ S.W./6/ Terr.	2a. Mailing Address 26 /378/ S	.W. 161 Torr	4. FEI Number . 65-05472	Applied For Not Applicat.
Suite, Apt.		Suite. Apt #, etc.	<u>,</u>	5. Certificate of Status Desire	\$8.75 Additional Fee Required
City & State		City & State 28	FL	6. Election Campaign Financial Entit Franci Contribution	\$5.00 May Be Added to Fees
Zp 24 33/	Country	^{Z₁ρ} 29 33/77	Country 30 Dade		/ for intangible tax under s 199.032. Yes \[\sum No
	9. Name and Address of Current	Registered Agent		10. Name and Address of N	w Registered Agent
343 AL	AWYER MERDA AVENUE GABLES PL 33134			Albert F. Latorre Joress (P.O. Box Number is Not Acce O/ S.W. 13 Ter	
				MAMI	
11. Pursuant to the provisions of Acquirins 607 0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered off or registered agent, or both in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with an accept the appointment as registered agent. I am familiar with an accept the appointment as registered agent. I am familiar with an accept the appointment as registered agent. I am familiar with an accept the appointment as registered agent. I am familiar with an accept the appointment as registered agent. I am familiar with a accept the appointment as registered agent. I am familiar with acceptance of the appointment as registered agent. I am familiar with a accept the appointment as registered agent. I am familiar with a acceptance of the appointment agent a					
12.	OFFICERS AND		13.	ADDITIONS CHANGES TO	OFFICERS AND DIRECTORS IN 1
TITLE	P	☐ DELETE	1 1 TITLE		☐ Change ☐ Addition
NAME	LLIZO, ROLANDO		12 NAME		
STREET ADDRESS	7841 SOUTHWEST 152ND AV	enue, unit 8	1 3 STREET ADDRESS		
CITY - ST - ZIP	MIAMI FL 33193	☐ DELETE	1.4 CITY - ST - ZIP		C C
TITLE NAME		☐ percete	2.1 TITLE 2.2 NAME		Change Addition
STREET ADDRESS			2 3 STREET ADDRESS		
CITY - ST - ZIP			2 4 CITY - ST - ZIP		
TITLE		☐ DELETE	3 1 TITLE		☐ Change ☐ Addition
NAME		_	32 NAME	200	1001943152
STREET ADDRESS			3 3 STREET ADDRESS	-09/1	0/9601077004
CITY-ST-ZIP			34 CITY - ST - ZIP	米米米米	200 .0 0 ****200.00
TITLE		☐ DELETE	4 1 TITLE		Change Addition
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CHTV - ST - ZIP	L		4.4 City - St - ZiP		
TeTLE		☐ DELETE	5 1 TITLE		Change Addition
NAME			5 2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS	1 h 1.	
CITY - ST - ZIP			54 CITY+ST-ZIP	11/1919	
TITLE		☐ D€LETE	6. 1 TITLE	16 1.	Change Addition
NAME			62 NAME	φ.	
STREET ADDRESS			6 3 STREET ADDRESS	•	
CITY - ST - ZIP			64 CITY - ST - ZIP		
14. I do hereby	y certify that the information supplied with	h this filing is voluntarily furnish	ned and does not qualify	for the exemption stated in Section	19.07(3)(k), Florida Statutes. I further

14. 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 supplied index 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 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 address.

SIGNATURE: K

SURPLIFIED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

4-25-96 (305) 278-255

Daytime Phone #