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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT F STATE

Sandra B. Mortham

Secretary of Stat

DIVISION OF CORPORTIONS

FILED Feb 04 1997 8:00am Secretary of State

	September 1997	
DOCUMENT 1. Corporation Name	# P9500003226	(4)

ADVENTURE COMPUTER INC.

Principal Place of Business

Mailing Address

6720 N.W. 72ND AVENUE

6720 N.W. 72ND AVENUE

|--|

MIAMI FL 33166		MIAMI FL 33168-3045			
				3. Date Incorporated or Qualified 01/12/1995	3a. Date of Last Report 03/19/1996
2. Principal Pla	NW 79 AUENUE	2a. Mailing Address 26 1527 NW	79th AUSHUE	4. FEI Number	Applied For
21 15,27 Suite, Apt #		26 152 NW Suite, Apt. #, etc.	11 name	65-0550492	Not Applicable \$8.75 Additional
22	, , , , , , , , , , , , , , , , , , , ,	27		5. Certificate of Status Desired	Fee Required
City & State	i FL	City & State	FL	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for it	ntangible tax under s. 199.032,
24 33126			30 USW ·		Yes No
0111	9, Name and Address of Current	Hegistered Agent	81 Name	10. Name and Address of New Re	Jistered Agent
	NG, ELSA T N.W. 72ND AVENUE				6 -
	II FL 33168		82 Street Addr	ess (P.O. Box Number is Not Acceptab	SEXUE !
			83	1 1400 1-1 13-2	
			84 City .		85 ZupCode_ C
			I I IM	IPMI	FL 30126
11. Pursuant to	the provisions of Sections 607 0502	and 607.1508, Florida Statute of Florida, Such change was au	s, the above-named corp	poration submits this statement for the pion's board of directors. I hereby accept	urpose of changing its registered it the appointment as registered
agent Lan	familiar with, and accept the obligat	ions of Section 667 0505. Flor	ida Statutes.	V	ما ما
SIGNATURE	ight sure typed or per tag name of regulated agent		LSA T. CHAU Registered Agent signature require		2 <u> 20 97</u>
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
T:TLE	D	DELETE	1.1 TITLE		Change Addition
NAME	CHANG, ELSA T		1.2 NAME		
STREET ADDRESS	3800 YACHT CLUB DR. #1504		1.3 STREET ADDRESS	2	
CITY+ST-ZIP	MIAMI FL 33180		1.4 CITY-ST-ZIP		
TITLE	D DATE OF	☐ DELETE	2.1 TITLE		L_ Change L_ Addition
NAME	CHANG, PAULO J 3600 YACHT CLUB DR. #1504		2.2 NAME		
STREET ADDRESS	MIAMI FL 33180		2.3 STREET ADDRESS		
CITY-S1-2IP TITLE	MICHII FE 33 100	DELETE	2. 4 C(TY - ST - Z)P 3.1 T(TLE		☐ Change ☐ Addition
NAME			3.2 NAME		· · · · · · · · · · · · · · · · · · ·
STREET ADDRESS			3 3 STREET ADDRESS		
CHY-S1-ZP			3 4. CITY - ST - ZIP		
TITLE		DELETE	4.1 T(TLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIF		Drufft	4.4 CITY-S1-ZIP		Change Addition
TOLE		DELETE	5.1 TITLE		Change Addition
NAME CZCO Z ADDOGECO			5.2 NAME 5.3 STREET ADDRESS		
STREET ADDRESS CITY - ST - ZIP			5.4 CITY - ST - ZIP		
TIFLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STR ET ADDRESS		
CITY - ST - ZIP			6.4 CIT ST - ZIP		
14. Ldo bereb	vicertify that the information supplied	with this fit no does not qualify	for the exemption stated	d in Section 119,07(3)(i), Florida Statute	s. I further certify that the

Information indicated on this annual report or supplemental annual report is true and a curate 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 13 if changed, or on an attachment with an address.