Amend **FILE NOW: FILING FEE AFTER MAY 1 IS $550.00**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT
CORPORATION
ANNUAL REPORT
1997

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

DOCUMENT # P95000021885

1. Corporation Name
AMERICAN COMPUTER SERVICES INC.

Principal Place of Business
9673 RIVERSIDE DR. APT. J1
CORAL SPRINGS FL. 33071

Mailing Address
← SAME

2. Principal Place of Business
21 9673 RIVERSIDE DR.
Suite, Apt. #, etc.
22 APT. J1
City & State
23 CORAL SPRINGS FL.
Zip
24 33071
Country
25 U.S.

2a. Mailing Address
26 ← SAME
Suite, Apt. #, etc.
27
City & State
28
Zip
29
Country
30

3. Date Incorporated or Qualified
1995 (NOT SURE)

3a. Date of Last Report
THIS YEAR

4. FEI Number
65-0568900

Applied For
Not Applicable

5. Certificate of Status Desired ☑ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [ ] $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes [ ] Yes [ ] No

9. Name and Address of Current Registered Agent
ANNIE LINARES
8140 S.W. 21 COURT
PLANTATION FL.

10. Name and Address of New Registered Agent
81 Name: ANA OLGA SALOMON
82 Street Address (P.O. Box Number is Not Acceptable): 9673 RIVERSIDE DR. APT. J1
83
84 City: CORAL SPRINGS FL 85 Zip Code: 33071

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, 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 accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Ana Olga Salomon — 10-14-97
(NOTE: Registered Agent signature required when resigning) DATE

12. OFFICERS AND DIRECTORS ☑ DELETE

TITLE	
NAME	RAUL E. LINARES
STREET ADDRESS	8140 S.W. 21 COURT
CITY-ST-ZIP	PLANTATION FL.
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS ☑ Addition

11 TITLE	PRESIDENT
12 NAME	ANA OLGA SALOMON
13 STREET ADDRESS	9673 RIVERSIDE DR. APT. J1
14 CITY-ST-ZIP	CORAL SPRINGS FL. 33071
21 TITLE	
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

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****70.00 ****70.00

CR2E034 (9/96)

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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.

SIGNATURE: Raul E. Linares / Ana Olga Salomon — 10/14/97 / 11/6/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #