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

P95000047770 (9) **DOCUMENT #** 1. Corporation Name

CYBER-TECH COMPUTERS, INC.

Mailing Address Principal Place of Business 8045 NW 36TH STREET STE 5064 MIAIGI, FL 33166 3a. Date of Last Report 3. Date Incorporated or Qualified 06/09/1995 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business 21 8045 NW 36TH ST Not Applicable 65-0593489

\$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required STE 5064 \$5.00 May Be 6. Election Campaign Financing City & State Trust Fund Contribution Added to Fees 28 8. This corporation has liability for intangible tax under s 199.032, Country Zio Yes No Florida Statutes 30 29

25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name

LEANDRO BONDAN RONDON Street Address (P.O. Box Number is Not Acceptable) 8045 NW 36TH STREET STE 5064 83 MIAMI, FL 33166 Zip Code 84 City 85

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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title it applicable (12/95) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ Change ☐ Addition DELETE 1 1 DILE PRESIDENT PIZESIDENT TITLE LEANDRO BOHDAN PONDON 8045 NW 36 TREET STE 506A LEANDRO BOHDAN RONDON CR2E034 1.2 NAME NAME 8045 NW 86" STEET STE 5064 1.3 STREET ADDRESS STREET ADDRESS MIAMI, FL 33166 MIAMI, FL 33166 1.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 2 1 TITLE TITLE 22 NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY - ST - ZIP CHY-ST-ZIP ☐ Addition Change DELETE 3 1 TIFLE 32 NAME NAME 3.3. STREET ADDRESS STREET ADDRESS 3.4 CITY-S1-ZIP CITY - ST - ZIP Addition Change DELETE 4.1 TITLE TITLE 4.2 NAME NAME 43 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP Addition Change □ DELETE 5 1 TITLE TITLE 5 2 NAME NAME 53 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-S1-ZIP Change Addition DELETE 6. 1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with the 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 of 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.

04-02-96 (305)599-2689