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Feb 21 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000054535 (6)

1. Corporation Name

WINIX COMPUTING, INC.

Principal Place of Business

609 SIESTA KEY CIRCLE
SUITE 3411
DEERFIELD BEACH FL 33441
US

Mailing Address

609 SIESTA KEY CIRCLE
SUITE 3411
DEERFIELD BEACH FL 33441-7719
US

3. Date Incorporated or Qualified

07/14/1995

3a. Date of Last Report

04/12/1996

2. Principal Place of Business

21 6224 FLORIDIAN CIRCLE

2a. Mailing Address

25 6224 FLORIDIAN CIRCLE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 LAKE WORTH, FL

City & State

28 LAKE WORTH, FL

Zip

24 33463

Country

25 USA

Zip

29 33463

Country

30 USA

4. FEI Number

65-0600612

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

PAWUTIYATONG, KWANCHAI
609 SIESTA KEY CIRCLE #3411
SUITE 3411
DEERFIELD BEACH FL 33441

10. Name and Address of New Registered Agent

81 Name PAWUTIYAPONG KWANCHAI
82 Street Address (P.O. Box Number is Not Acceptable)
6224 FLORIDIAN CIRCLE
83
84 City LAKE WORTH FL 85 Zip Code 33463

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

Kwanchai Pawutyapong

(KWANCHAI PAWUTIYAPONG, PRESIDENT)

02/12/97

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE
NAME PAWUTIYAPONG, KWANCHAI
STREET ADDRESS 609 SIESTA KEY CIRCLE, #3411
CITY-ST-ZIP DEERFIELD BEACH FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P ☒ Change ☐ Addition
1.2 NAME PAWUTIYAPONG KWANCHAI
1.3 STREET ADDRESS 6224 FLORIDIAN CIRCLE
1.4 CITY-ST-ZIP LAKE WORTH, FL 33463

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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:

Kwanchai Pawutyapong
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/12/97 (561)965-1758
Date Daytime Phone #

CR2E034 (9/96)