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FILED
Feb 17 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P95000063116 (4)

1. Corporation Name

COMPUTRONICS COMPUTER CORPORATION

Principal Place of Business

P.O. BOX 3052
HOLIDAY FL 34680-3052

Mailing Address

1961 US ALT 19N
TARPOON SPRINGS FL 34680-3052
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/15/1995

4. FEI Number

50-3330585

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21 1961 US Alt 19 NO

2a. Mailing Address

26 P O BOX 3052

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Tarpon Spring Fl

City & State

28 Holiday, Fl 34690

Zip

24 34689

Country

25 USA

Zip

29 34690

Country

30 USA

9. Name and Address of Current Registered Agent

JOHN W. STAMATHIS
1734 ARABIAN LANE
PALM HARBOR FL 34685

10. Name and Address of New Registered Agent

81 Name

TAMAS KIS

82 Street Address (P.O. Box Number is Not Acceptable)

1426 Whitehall Lane

83

84 City

HOLIDAY

FL

85 Zip Code

34691

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

Tamas Kis

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

(NOTE: Registered Agent signature required when reinstating)

2-13-98

DATE

12. OFFICERS AND DIRECTORS

TITLE VP ☒ DELETE

NAME CHERYL J. THERRIEN
STREET ADDRESS 3508 WESTMINISTER CT
CITY-ST-ZIP HOLIDAY 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 VP ☐ Change ☒ Addition

1.2 NAME Tamas Kis
1.3 STREET ADDRESS 1426 Whitehall Lane
1.4 CITY-ST-ZIP Holiday, Florida 34691

2.1 TITLE Sec/CEO ☐ Change ☒ Addition

2.2 NAME T.R. Therrien
2.3 STREET ADDRESS 3508 Westminister Court
2.4 CITY-ST-ZIP Holiday, Florida 34691

3.1 TITLE P ☐ Change ☒ Addition

3.2 NAME Donna DeBoer
3.3 STREET ADDRESS 4246 Courier Lane
3.4 CITY-ST-ZIP Holiday, FL 34691

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 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

T R T

T R T

2-13-98

CR2E034 (10/97)