PROFIT CORPORATION ANNUAL REPORT

1996



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

DOCUMENT #

1. Corporation Name

P95000068734 (9)

COMPUTER CONVERSION SPECIALISTS CO., INC.

Principal Place of Business Mailing Address 2006 NO. 48TH AVENUE 2006 NO. 48TH AVENUE HOLLYWOOD FL 33021 HOLLYWOOD FL 33021 3. Date Incorporated or Qualified 3a. Date of Last Report 09/06/1995 Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 Florida Statutes Yes No 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name NEY, RICHARD M Street Address (P.O. Box Number is Not Acceptable) 2006 NO. 48TH AVENUE HOLLYWOOD FL 33021 83 84 City 65 Zip Code 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 Signature, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1 1 TITLE D. ☐ Change NAME NEY, RICHARD M 1.2 NAME STREET ADDRESS 2006 NO. 48TH AVENUE 1.3 STREET ADDRESS 33021-4136 HOLLYWOOD FL 33021 CITY-ST-7IP 1.4 CITY-ST-ZIP TITLE DELETE 2 1 TITLE Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE ☐ Change TITLE Addition 3 1 TITLE NAME 32 NAME STREET ADDRESS 3.3. STREET ADDRESS CITY-ST-ZIP 34 CITY-ST-ZIP DELETE TITLE 4. 1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-7IP 4.4 CITY - ST - ZIP DELETE THILE Change Addition 5 1 TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 DITY-ST-ZIP DELETE TITLE 6 1 TITLE Change Addition

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

D NAME OF SIGNING OFFICER OR DIRECTOR

6.3 STREET ADDRESS

64 CITY-ST-ZIP

SIGNATURE:

NAME STREET ADDRESS

CITY-ST-2IP

4/28/96

984 987-0530

Daytime Phone #

CR2E034 (12/95)