

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P95000069570 (6)**

1. Corporation Name

CYBER COMPUTER SYSTEMS, INC.



Principal Place of Business

**4550 NORTHWEST 9 STREET, UNIT 707
MIAMI FL 33126**

Mailing Address

**4550 NORTHWEST 9 STREET, UNIT 707
MIAMI FL 33126**

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

Country

29

Zip

30

Country

9. Name and Address of Current Registered Agent

**THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD
343 ALMERIA AVENUE
CORAL GABLES FL 33134**

3. Date Incorporated or Qualified
09/11/1995

3a. Date of Last Report

4. FEI Number
65 060 5897

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 facility for intangible tax under s. 199.032,
Florida Statutes. ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 of person authorized to execute this statement on behalf of the corporation

Signature of Registered Agent (Required for Change of Registered Agent)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**PSTD
ANSELMIN, JOSEPH F
4550 NORTHWEST 9 STREET, UNIT 707
MIAMI FL 33126**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
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TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joseph F. Anselmin

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE ☐ Change ☐ Addition
2. NAME
3. STREET ADDRESS
4. CITY-STATE-ZIP
5. TITLE ☐ Change ☐ Addition

6. NAME
7. STREET ADDRESS
8. CITY-STATE-ZIP
9. TITLE ☐ Change ☐ Addition

10. NAME
11. STREET ADDRESS
12. CITY-STATE-ZIP
13. TITLE ☐ Change ☐ Addition

14. NAME
15. STREET ADDRESS
16. CITY-STATE-ZIP
17. TITLE ☐ Change ☐ Addition

18. NAME
19. STREET ADDRESS
20. CITY-STATE-ZIP
21. TITLE ☐ Change ☐ Addition

22. NAME
23. STREET ADDRESS
24. CITY-STATE-ZIP
25. TITLE ☐ Change ☐ Addition

26. NAME
27. STREET ADDRESS
28. CITY-STATE-ZIP
29. TITLE ☐ Change ☐ Addition

30. NAME
31. STREET ADDRESS
32. CITY-STATE-ZIP
33. TITLE ☐ Change ☐ Addition

SIGNATURE:

Joseph F. Anselmin

3/2/96

305 567 1339

CR2E034 (12/95)