## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000076825

1. Corporation Name

## **FILED** Jan 27, 1999 8:00am **Secretary of State**

01-27-1999 90042 034 \*\*\*158.75

TECH-BYTE COMPUTERS, CORP.				
Principal Place of Business	Mailing Address		I (Saltan ten stret entre sant sant sant	
1460-O NORTH WEST 107TH AVENUE	1460-0 NORTH WEST 107TH AV MIAMI FL 33172	venue ·	DO NOT WRITE IN THI	e edace
			3. Date Incorporated or Qualifed	3 SFACE
			10/06/1995	
	2a. Mailing Address	<del></del>	4. FEI Number	Applied For
2. Principal Place of Business	<u> </u>		65-0668935	Not Applicable
Suite, Apt, #, etc.	Suite, Apt. #, etc.			\$8.75 Additional
	27		5. Certifcate of Status Desired	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 owes the current year In	
24 25	29 30	·	Personal Property Tax.	Yes No
9. Name and Address of Curren		nal c	10. Name and Address of New Registered	Agent
	表表。看见的"CD"	81 Name	•	
FERREIRA, RUDA G	٠	82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
1460-O NORTH WEST 107TH AVENU			200 Pr WW 400	18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
MIAMI FL 33172		83	1966年 1968年	性的特別的問題
•		84 City	77 THE RESERVE TO THE	85 Zip Code
				L
11. Pursuant to the provisions of Sections 607.050 office or registered agent, or both, in the State	2 and 607.1508, Florida Statutes, t	the above-named corp orized by the corporation	poration submits this statement for the purpose to ion's board of directors. I hereby accept the app	ointment as registered
agent, am familiar with, and accept the obliga	tions of Section 607.0505, Florida	Statutes.		
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(00)			1/-	7/99
SIGNATURE Signature, typed or printed name of registered ager	nt and title if applicable. (NOTE: Reg	istered Agent signature require		7/99 AND DIRECTORS IN 12
SIGNATURE Signature, typed or printed name by registered ages	nt and title if applicable. (NOTE: Reg	istered Agent signature require	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12  Change Addition
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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 suppliemental 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 trastee 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, with all other like empowered.

SIGNATURE: