

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P95000082313 (4)

1. Corporation Name

ASCI COMPUTER INC.



Principal Place of Business

Mailing Address

% A A ALI, CPA  
6239 EDGEWATER DR., STE. D7  
ORLANDO FL 32810

% A A ALI, CPA  
6239 EDGEWATER DR., STE. D7  
ORLANDO FL 32810

3. Date Incorporated or Qualified  
10/16/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 4506 Curryford Rd

26 Suite, Apt. #, etc.

22 City & State  
23 Orlando, FL

27 City & State

24 Zip 32812 25 Country

28 Zip 30 Country

4. FEI Number  
59-3344898

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

10. Name and Address of New Registered Agent

ALI, AKBAR A  
260 MOCKINGBIRD LN  
CASSELBERRY FL 32707

81 Name Clifford Skeete

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

83

84 City Kissimmee St Cloud FL 85 Zip Code 34769

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

NOTE: Registered Agent signature required when reinstating

DATE

CLIFFORD SKEETE

C. Skeete

4/26/96

12. OFFICERS AND DIRECTORS

TITLE	DS	<input type="checkbox"/> DELETE
NAME	SKEETE, CLIFFORD	
STREET ADDRESS	4506 CURRYFORD RD.	
CITY-ST-ZIP	ORLANDO FL 32812	
TITLE	DP	<input type="checkbox"/> DELETE
NAME	ALI, AKBAR A	
STREET ADDRESS	260 MOCKINGBIRD LN	
CITY-ST-ZIP	CASSELBERRY FL 32707	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS	301 Macon Way, St Cloud, FL	
1.4 CITY-ST-ZIP		
2.1 TITLE	Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

C. Skeete - Clifford Skeete - Office 407-282-1818

4/26/96

Daytime Phone #

CR2E034 (12/95)