## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham

Secretary of State

DIVISION OF CORPORATIONS

## DOCUMENT # P95000086580 (4)

COMPUTER 101 & COMPANY, INC.

Principal Place of Bu	ISINESS	Mailing Add	ress			
2475 APALACHEE PARKWAY. #104 - 107 TALLAHASSEE FL 32301			TALLAHASSEE FL 32301			
						3. Date Incorporated or Qualified 3a. Date of Last Report 11/13/1995
2. Principal Place of	Business	2a. Mailing	Address			4. FEI Number Applied For 59 - 3346267 Not Applied For
21		26				59-334626/ Not Applicat
Suite, Apt #, etc		Suite, Ap	ot. #, etc.			5. Certificate of Status Desired Fee Required
City & State		City & S	ate			6. Election Campaign Financing 5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip		Countr	У	8. This corporation has liability for intangible tax under s. 199 032,
24	25	29		30		Florida Statutes Yes No  10. Name and Address of New Registered Agent
9.	Name and Address of Curr	ent Registered Age	ent	81	Name	
JACK, N					<u> </u>	
	PALACHEE PARKWAY, #	104 - 107		82	Street /	t Address (P.O. Box Number is Not Acceptable)
TALLAH	ASSEE FL 32301			83	<del>                                     </del>	
					L Cau	85 Zip Code
				84	' '	<b>FL</b>
office or registe agent. I am fam	provisions of Sections 607.0 red agent, or both, in the Sta illiar with, and accept the obl	de al Florida, Such d	thance was i	aumonzed by	rine corb	s corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
SIGNATURE	ire, typed or printed name of registered	agent and tille if applicable	(fic		ent signature	re required when renshing) DATE
12.	OFFICERS A	AND DIRECTORS	T percu	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12    PRESIDENT   Change   Additional Additional Change   Additional Change   Additional Change   Additional Change   Change   Additional C
TITLE		L	DELÉTE	1.1 TITLE		LINE AL INCK
NAME				1.2 NAM6	I ADDRESS	2475 APALACHEE YKWY # 105
STREET ADDRESS				1.3 SINC		TALLAHASSEE FL 32301
CITY-ST-ZIP TITLE			DELETE	21 TIFLE		TALLAHASSEE, FL 3 2301 VICE - PRESIDENT Change Ly Addition
NAME		_		2.2 NAME		
STREET ADDRESS				23 STRE	1 ADDRESS	12025 HARPERS FERRY PA
CITY-ST-ZIP				2 4 CITY	- ST - ZIP	TALLAHASSEE FL 32308
TITLE			DELETE	3 1 TITLE		Change Addi
NAME				3 2 NAMI		
STREET ADDRESS				L	ET ADDRESS	3
CITY-ST-ZIP			DELETE	3.4 CITY		Change Addu
TITLE		L	_ DECE IE	4.1 TITLE		
NAME				4 2 NAV	et address	
STREET ADDRESS				4.4 CiTY		
CITY-ST-ZIP TITLE			DELETE	5 1 TITLE		Change Addi
NAME		_	<del></del>	5 2 NAM		
STREET ADDRESS				5.3 STRE	ET ADDRESS	s
CITY-ST-ZIP				5 4 CiTY	- ST - <b>Z</b> IP	
TITLE		L	DELETE	6 1 THTLE		Change Add
NAME				62 NAM	E	
STREET ADDRESS					ET ADDRESS	s
CITY - ST - ZIP				6 4 CITY		ot qualify for the exemption stated in Section 119.07(3)(x). Florida Statutes 1
further certify t made under oa that my name a	ruly that the information supp hat the information indicated ath, that Jaman officer ox dir appears in Block 12 or Block	on this annual repo eclar of the corpora (3 inchanged, prior	rt or suppler tion or the re an attach	mental annua eceiver or trus lent with an a	report is tee empo ddress	of quality for the exemption states in Section 119 07(3)(3), Florida status is true and accurate and that my signature shall have the same legal effect as lowered to execute this report as required by Chapter 617, Florida Statutes, a

SIGNATURE:

ATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/26/96 (904)6560101

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