## 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

## Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90150 009 \*\*\*150.00

## DOCUMENT # P9600001714

DOWNTOWN COMPUTER SERVICES, INC.

Principal Place	oi business
757 SE 17TH ST	<b>#</b> 742
ET LAUDEDDALE	E) 22216

Mailing Address

757 SF 17TH ST #742 FT LAUDERDALE FL 33316



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 01/01/1996 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 512 S Andrews Not Applicable 65-0634586 512 South Andrews Maze Suite, Apt. #, etc \$8.75 Additional Suite, Apt. #, etc. 5. Certifcate of Status Desired  $\Box$ Fee Required 22 City & State \$5.00 May Be 6. Election Campaign Financing City & State Ft. Lauderdale Added to Fees Pt. La Trust Fund Contribution Zip 3 8. This corporation owes the current year Intangible Country USA ☐ Yes USA *330* Personal Property Tax. 30 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent DOEL, CHERYL 82 STAR ROUTE 3 BOX 530 SATSUMA FL 32189 83 Zip Code 33319 84 85 City 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. Konstantin Berkach SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12 Change DELETE 1.1 TITLE **PSTD** TITLE 1.2 NAME DOEL, CHERYL L NAME STAR ROUTE 3 BOX 530 1.3 STREET ADDRESS STREET ADDRESS SATSUMA FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition TREASURE DELETE ☐ Change 2.1 TITLE Konstantin Derkach TITLE Bluffs PL 2.2 NAME NAME 3402 Spring 2.3 STREET ADDRESS STREET ADDRESS Lauderhill 2 4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY+ST-ZIP CITY-ST-ZIP ☐ Addition ☐ DELETE 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition 6.1 TITLE DELETE TILE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP.

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 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, with all other like empowered.

SIGNATURE:

Derkach

CR2E034 (11/98)