

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

FILED
Apr 14 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000007813 (4)**

1. Corporation Name
CHOICE COMPUTER CONSULTANTS, INC.

Principal Place of Business 205 E. CENTRAL BOULEVARD SUITE 304 ORLANDO FL 32801	Mailing Address 1342 E VINE ST #399 KISSIMMEE FL 34744 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 01/25/1996	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-3363399	Applied For <input type="checkbox"/> Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input checked="" type="checkbox"/> \$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**NISI, FRANK P JR.
205 E. CENTRAL BOULEVARD
SUITE 304
ORLANDO FL 32801**

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 607.1508, 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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPTS	1.1 TITLE	DIRECTOR
NAME	VOYATZOGLU, THEODOSIOS	1.2 NAME	STEVEN F. GROSS
STREET ADDRESS	1342 E VINE ST #399	1.3 STREET ADDRESS	4920 ASHLEY LANE # 324
CITY-ST-ZIP	KISSIMMEE FL	1.4 CITY-ST-ZIP	INVER GROVE HEIGHTS MN 55077
TITLE	V	2.1 TITLE	DIRECTOR
NAME	MATTHEE, MARGUOT MARIA	2.2 NAME	PIETER DEN BOER
STREET ADDRESS	1342 E VINE ST #399	2.3 STREET ADDRESS	CENTURION PARK NO. 6, 256 VAN WILICH AVE.
CITY-ST-ZIP	KISSIMMEE FL	2.4 CITY-ST-ZIP	CENTURION 0046, REP. SOUTH AFRICA
TITLE	D	3.1 TITLE	DIRECTOR
NAME	SEEFRIED, EDWARD B	3.2 NAME	KOBUS LOUW
STREET ADDRESS	2735 RED FOX RD	3.3 STREET ADDRESS	CENTURION PARK NO. 6, 256 VAN WILICH AVE.
CITY-ST-ZIP	ORANGE PARK FL	3.4 CITY-ST-ZIP	CENTURION 0046, REP. SOUTH AFRICA
TITLE		4.1 TITLE	VICE PRESIDENT
NAME		4.2 NAME	MARK SAMPSON
STREET ADDRESS		4.3 STREET ADDRESS	5285 GREYSTONE DR. # 102
CITY-ST-ZIP		4.4 CITY-ST-ZIP	INVER GROVE HEIGHTS MN 55077
TITLE		5.1 TITLE	VICE PRESIDENT
NAME		5.2 NAME	HUBERTUS VAN LEEUWEN
STREET ADDRESS		5.3 STREET ADDRESS	6565 S. SYRACUSE WAY # 2313
CITY-ST-ZIP		5.4 CITY-ST-ZIP	ENGLEWOOD CO 80111
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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.

SIGNATURE:

4/2/98 (954) 858-1996

CR2E034 (10/97)