

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

FILED

May 06 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000016098 (1)

1. Corporation Name

P.D.Q. COMPUTER SALES & LEASING CORP.



Principal Place of Business

~~5070 S.W. 21 STREET~~
~~HOLLYWOOD FL 33023~~

Mailing Address

~~5070 S.W. 21 STREET~~
~~HOLLYWOOD FL 33023-3010~~

2. Principal Place of Business

21 6453 PEMBROKE RD

Suite, Apt. #, etc.

City & State

23 HOLLYWOOD, FL

Zip

24 33023

Country

25 US

2a. Mailing Address

26 7160 SW 16 ST.

Suite, Apt. #, etc.

City & State

28 PEMBROKE PINES, FL

Zip

29 33023

Country

30 US

9. Name and Address of Current Registered Agent

KLOSENBERG, F.P.
2117 HOLLYWOOD BLVD.
HOLLYWOOD FL

3. Date Incorporated or Qualified

03/01/1996

3a. Date of Last Report

4. FEI Number

65-0649541

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

10. Name and Address of New Registered Agent

81 Name

82 JOSEPH SPARACINO

83 Street Address (P.O. Box Number is Not Acceptable)

7160 SW 16 St.

84 City

PEMBROKE PINES, FL

85 Zip Code

33023

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

JOSEPH SPARACINO, PRESIDENT

Signature typed printed name of registered agent and title (Applicable)

(NOTE: Registered Agent signature required when reappointing)

DATE

4/28/97

12. OFFICERS AND DIRECTORS

TITLE

DPS
NAME SPARACINO, JOESPH
STREET ADDRESS 7160 S.W. 16 STREET
CITY-ST-ZIP PEMBROKE PINES FL

☐ DELETE

TITLE

NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE

NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE

NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE

NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE

NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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 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

JOSEPH SPARACINO

4/20/97 (954) 912-1117

CR2E034 (9/96)