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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000019789 (2)

FILED Mar 16 1998 8:00am Secretary of State

	NTERNATIONAL COMPUTE					
Principal Plac	e of Business	Mailing Address			i intifinat the their anit antit alle gart anit boint	LEMAN AMELY CHAND CHAIM EMIT (DM)
8051 TAMIAMI TRAIL N SUITE #24 SARASOTA FL 34234		8051 TAMIAMI TRAIL N SUITE #24 SARASOTA FL 34234		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/01/1996		
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
जे		26			65-0653550	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional	
22		27			5. Certificate of Status Desired	Fee Required
City & Sta	te	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zıp	Country	7 (p	C	ountry	B. This corporation owes or has paid the	
4	26	29	30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	ent Registered Agent		81 Name	10. Name and Address of New Register	ed Agent
UMBERGER, RONALD W 8051 TAMIAMI TRAIL N SUITE #24					Idress (P.O. Box Number is Not Acceptable)	
						<u></u>
SARASOTA FL 34234				83		
				84 City	F	85 Zip Code
office or	registered agent or both in the Ctut			ROOVA-DAMAA CO	progration submits this statement for the purposi	e of changing its registered.
agent. I a SIGNATURE					orporation submits this statement for the purpos- ration's board of directors. I hereby accept the a	
SIGNATURE	Signature, typod or printed name of registered a	gont and the if applicable	(NOTE: Flegiste	red Agent signature req	quired when reinstating) DATI	E
SIGNATURE	Signature, typed or printed name of registered a OFFICERS A		(NOTE: Flegisla	red Agent signature req		E AND DIRECTORS IN 12
SIGNATURE 12. TITLE	Signature, typed or printed name of repristred a OF1 (CERS A)	gent and the if applicable	(NOTE: Flegiste	red Agent signature req	quired when reinstating) DATI	E AND DIRECTORS IN 12
SIGNATURE 12. TITLE NAME	Signature, typed or printed name of repristored a OFFICERS A D UMBERGER, RONALD W	gont and life if applicable NO DIRECTORS	(NOTE: Flegista 13 LETE 1.1	red Agent signature red TITLE	quired when reinstating) DATI	E AND DIRECTORS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, typed or printed name of repretered a OFFICERS A D UMBERGER, RONALD W 8051 TAMIAMI TRAIL N SUI	gont and life if applicable NO DIRECTORS	(NOTE: Register 13 15 15 1.1 1.2 1.3	red Agent signature red TITLE	quired when reinstating) DATI	E AND DIRECTORS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of repristored a OFFICERS A D UMBERGER, RONALD W	gont and life if applicable NO DIRECTORS	(NOTE: Flegisia 13 LETE 1.1 1.2 1.3 1.4	rod Agent signature red TITLE NAME STREET ADDRESS	quired when reinstating) DATI	E AND DIRECTORS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of repretered a OFFICERS A D UMBERGER, RONALD W 8051 TAMIAMI TRAIL N SUI	great and lete if applicable NO DIRECTORS DE	(NOTE Register 13 LETE 1.1 1.2 1.3 1.4 LETE 2.1	rod Agent signature red TITLE NAME STREET ADDRESS CITY-ST-ZIP	quired when reinstating) DATI	E AND DIRECTORS IN 12 Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of repretered a OFFICERS A D UMBERGER, RONALD W 8051 TAMIAMI TRAIL N SUI	great and lete if applicable NO DIRECTORS DE	(NOTE Registe 13 LETE 1.1 1.2 1.3 1.4 LETE 2.1 22	red Agent signature req TITLE NAME STREET ADDRESS CITY-ST-ZIP	quired when reinstating) DATI	E AND DIRECTORS IN 12 Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP	Signature, typed or printed name of repretered a OFFICERS A D UMBERGER, RONALD W 8051 TAMIAMI TRAIL N SUI	pool and liter if applicable NO DIRECTORS DEI TE #24	(NOTE Registe 13 15 1.1 1.2 1.3 1.4 ETE 2.1 2.2 2.3 2.4	red Agent signature req . TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP	quired when reinstating) DATI	E AND DIRECTORS IN 12 Change Addition Change Addition
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SIGNATURE 12. ITILE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME	Signature, typed or printed name of repretered a OFFICERS A D UMBERGER, RONALD W 8051 TAMIAMI TRAIL N SUI	pool and liter if applicable NO DIRE CTORS DEI TE #24	(NOTE Registe 13 LETE 1.1 12 1.3 1.4 LETE 21 22 2.3 2.4 LETE 31 3.2 3.3 3.4 LETE 4.1 4.2	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	quired when reinstating) DATI	E AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
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14. Thereby 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.

6.4 CITY+ST-ZIP

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

5.3 STREET ADDRESS 5.4 CITY - ST- ZIP

SIGNATURE:

NAME STREET ADDRESS

TITLE NAME

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

DELETE

Addition