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PROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P96000026497 (3)

ULTIMATE COMPUTER SERVICES, INC.

Principal Place of Business Mailing Address 12555 BISCAYNE BLVD 12555 BISCAYNE BLVD **SUITE 753** SUITE 753 NORTH MIAMI FL 33181 NORTH MIAMI FL 33181

FILED Mar 18 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/14/1996 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 21 26 65-0671164 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country This corporation owes or has paid the current year Intangible ☐ No Personal Property Tax due June 30. Yes Yes 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name TOLBER, REED S 700 S ANDREWS AVE Street Address (P.O. Box Number is Not Acceptable) FT LAUDERDALE FL 33316 83 Zip Code 84 City 85 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. Familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. (NOTE: Registered Agent signature required when reinstating) Signature Types or preted harm of regetter if a joint and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition TITLE DELETE 1.1 TITLE RICHARDSON, ROBERT M 1.2 NAME NAME 12555 BISCAYNE BLVD SUITE 753 1.3 STREET ADDRESS STREET ADORESS NORTH MIAMI FL 33181 1.4 CITY - ST - ZIP CITY - ST - ZIP ___ Addition DELETE Change 21 TITLE TITLE RICHARDSON, ROBERT M 22 NAME NAME 12555 BISCAYNE BLVD SUITE 753 23 STREET ADDRESS STREET ADDRESS NORTH MIAMI FL 33181 2 4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change 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 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADORESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

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 tustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if change it is an attachment with an address

SIGNATURE: