P96000027262

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REGISTERED AGENT CHANGE

COMPUTER ONE WHOLESALE, INC.

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RA Change
4/21/04

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

April 21, 2004

COMPUTER ONE WHOLESALE, INC.
P.O. BOX 144177
CORAL GABLES, FL 33114-4177

SUBJECT: COMPUTER ONE WHOLESALE, INC.
REF: P96000027262

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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Michelle Milligan
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA *in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: COMPUTER ONE WHOLESALE, INC.
2. The principal office address: P.O. BOX 144177, CORAL GABLES, FL 33114-4177
3. The mailing address (if different): P.O. BOX 144177, CORAL GABLES, FL 33114-4177
4. Date of incorporation/qualification: 3/27/96 Document number: P96000027262
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

CAROLINA F. DANTAS

2236 NW 82ND AVE.

MIAMI, FL 33122

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

AGENTS AND CORPORATIONS, INC.

SUITE E, 773 4TH AVENUE NORTH

(P.O. Box or personal mailbox NOT acceptable)

NAPLES, FL 34102

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature of an officer or director] CAROLINA DANTAS/VICE-PRESIDENT
[Typed or printed name and title]

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature of Registered Agent] 4/20/04
(Date)

If signing on behalf of an entity:

DAVID N. WILLIAMS
(Typed or Printed Name)

PRESIDENT
(Capacity)

* * * FILING FEE: $35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314