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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT

Sandra B. Morth

STATE

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000043325 (5) INFORMATION & COMPUTER TECHNOLOGY, INC. Principal Place of Business Mailing Address 3949 COMMERCE PKY. 3049 COMMERCE PKY. MIRAMAR FL 33025 MIRAMAR FL 33025-3936 3. Date Incorporated or Qualified 3a. Date of Last Report 05/21/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 69-066815 26 Not Applicable 21 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Country Country 8. This corporation has liability for intangible tax under s. 199.032, 🗌 Yes 🔲 No 29 30 Florida Statutes 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name FILINGS, INC. 3732 NW 16TH ST. 82 Street FT. LAUDERDALE FL 33311 83 84 City 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 from familiar very layer accept the appointment as registered agent from familiar very layer accepting filingation of 507.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) 12. OLLICERS AND DIRECT 13. n DELETE 1,1 TITLE Change Addition TITLE SMITH, NANCY 1,2 NAME 12E034 NAME 3949 COMMERCE PKY. STREET ADORESS 1.3 STREET ADDRESS MIRAMAR FL 33025 1.4 CITY-ST-ZIP CITY- ST. 289 Change DELETE 2.1 TITLE Addition Ditt 2.2 NAME NAMi 2.3 STREET ADDRESS STREET ADDRESS 2 4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - ZIP City St. Zip DELETE Change Addition THE 4.1 TITLE NAME 4. 2 NAME 4,3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CP1 Y - S1 - 201 DELETE Change Addition 5.1 TITLE THUE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-SI-7/2 54 CITY-ST-ZIP DELETE Change Addition 6 1 TITLE THILE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 DITY-ST-ZIP OTY - ST - ZiF 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 eath; 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 change it or on a valuachment with an address.

SIGNATURE

AND STATES OF PRINTED NAME OF SIGNING OFFICER OF DIRECTO

2/24/97

(954) 450-1061

FILED

Mar 04 1997 8:00am

Secretary of State