

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000080106 (3)

1. Corporation Name

COMPUWEB SERVICES INC.

Principal Place of Business

1207 NORTH PINE HILLS ROAD
ORLANDO FL 32808

Mailing Address

1207 NORTH PINE HILLS ROAD
ORLANDO FL 32808-6228

2. Principal Place of Business

21 City, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 146 ILIAD CT

27 Suite, Apt. #, etc.

28 City & State

29 OLOEE, FL

Zip

30

Country

30 U.S.A.

3. Date Incorporated or Qualified

09/26/1996

3a. Date of Last Report

09/26/1996

4. FEI Number

59-3401647

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

Fee Required

6. Election Campaign Financing

\$5.00 May Be

Trust Fund Contribution

Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

□ Yes

□ No

9. Name and Address of Current Registered Agent

CORPORATE CREATIONS ENTERPRISES, INC.
4521 PGA BOULEVARD
#211
PALM BEACH GARDENS FL 33418

81 Name

VIVEK S. ADESH

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

146 ILIAD CT

83

84 City

OLOEE

FL

85 Zip Code

34761

10. Name and Address of New Registered Agent

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.

4-27-97

SIGNATURE:

(Signature, typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	□ Change □ Addition
NAME	ADESH, VIVEK S	1.2 NAME	
STREET ADDRESS	1207 NORTH PINE HILLS ROAD	1.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32808	1.4 CITY-ST-ZIP	
NAME	ROSARIO, EDWIN	2.1 TITLE	□ Change □ Addition
STREET ADDRESS	1207 NORTH PINE HILLS ROAD	2.2 NAME	
CITY-ST-ZIP	ORLANDO FL 32808	2.3 STREET ADDRESS	
NAME	VELEZ, ELISEO	2.4 CITY-ST-ZIP	
STREET ADDRESS	1207 NORTH PINE HILLS ROAD	3.1 TITLE	□ Change □ Addition
CITY-ST-ZIP	ORLANDO FL 32808	3.2 NAME	
NAME		3.3 STREET ADDRESS	
STREET ADDRESS		3.4 CITY-ST-ZIP	
NAME		4.1 TITLE	□ Change □ Addition
STREET ADDRESS		4.2 NAME	
CITY-ST-ZIP		4.3 STREET ADDRESS	
NAME		4.4 CITY-ST-ZIP	
STREET ADDRESS		5.1 TITLE	□ Change □ Addition
CITY-ST-ZIP		5.2 NAME	
NAME		5.3 STREET ADDRESS	
STREET ADDRESS		5.4 CITY-ST-ZIP	
NAME		6.1 TITLE	□ Change □ Addition
STREET ADDRESS		6.2 NAME	
CITY-ST-ZIP		6.3 STREET ADDRESS	
NAME		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:

(Signature, typed or printed name of signing officer or director)

4-27-97

407-654-1621

Date

Daytime Phone #

CR2E034 (996)