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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED May 14, 1999 8:00 am Secretary of State

05-14-1999 90001 025 ***450.00

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000081653

Principal Place of Business 3256 LAKE WASHINGTON ROAD

CITY-ST-ZIP

SIGNATURE:

WHOLESALE WAREHOUSE COMPUTERS & ELECTRONICS, INC

Mailing Address

3256 LAKE WASHINGTON ROAD

MELBOURNE FL 32934		MELBOURNE FL 32934		DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qualifed	1		
					10/03/1996			
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number			Applied For
21		26			11-3115800		لـلــ	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired			5 Additional
22		27			5. Commence of Classes Seemed		Fee	Required
City & State		City & State			6. Election Campaign Financing			00 May Be
23		28			Trust Fund Contribution			ed to Fees
Zip	Country	Zip	Countr	У	8. This corporation owes the cu			
24	25		30		Personal Property Tax.		Yes	□No
	9. Name and Address of Curren	t Registered Agent	81	Name	10. Name and Address of New	Registered A	gent	
DACL	JID IRDALIKA		8	Name				
BASHIR, IBRAHIM 3256 LAKE WASHINGTON ROAD MELBOURNE FL 32934				Street Add	dress (P.O. Box Number is Not Accep	table)		
MEC	500HNE FL 32934		83	1				
			84	City			85 2	Zip Code
						FL_	بلل	
office or re	edistered agent or both in the State.	of Florida. Such change was aut	inorizea di	/ tne corporat	poration submits this statement for thi tion's board of directors. I hereby according	e purpose of c ept the appoin	manging tment a	s registered
agent. I ar	n familiar with, and accept the obliga	tions of, Section 607.0505, Flond	oa Statute	S.				
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable. (NOTE: F	Registered Age	ant signature requi	red when reinstating)	DATE		
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO O	FFICERS AN	D DIREC	CTORS IN 12
TITLE	DPST	☐ DELETE	1.1 TITLE				Char	nge
NAME	BASHIR, IBRAHIM		1.2 NAME					
STREET ADDRESS	3256 LAKE WASHINGTON RO	AD	1.3 STREE	ET ADDRESS				
CITY-ST-ZIP	MELBOURNE FL 32934		1.4 CITY-	ST-ZIP		_		
TITLE		☐ DELETE	2.1 TITLE				☐ Char	nge
NAME			2.2 NAME					
STREET ADDRESS			2.3 STREI	TADDRESS				
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP				
TITLE		☐ DELETE	3.1 TITLE				Char	nge Addition
NAME			3.2 NAME					
STREET ADDRESS			: 3.3 STREI	ET ADDRESS				
CITY-ST-ZIP			3.4. CITY-	ST-ZIP				
TITLE		☐ DELETE	4,1 TITLE				Char	nge Addition
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREI	ET ADDRESS				
CITY-ST-ZIP			4.4 CITY-	ST-ZIP				
TITLE		☐ DELETE	5.1 TITLE				Char	nge 🔲 Addition
NAME			5 2 NAME					
STREET ADDRESS			5.3 STRE	ET ADDRESS				
CITY-ST-ZIP			5.4 CITY-	ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE				☐ Char	nge 🗌 Addition
NAME			6.2 NAME					
STREET ADDRESS			6.3 STRE	ET ADDRESS				
CITY-ST-7IP			6.4 CITY-	ST-ZIP				

14. I 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, with all other like empowered.