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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000095977 (0)

IDEAL COMPUTING TECHNOLOGIES, INC.

Pri

FILED May 13 1997 8:00am Secretary of State

ncipal Place of Business	Mailing Address					
2 ISLAND BREEZE LANE IPA FL 33637	POST OFFICE BOX 17049 TAMPA FL 33682-7049					
		3. Date Incorporated or Qualified 11/25/1996	3a. Dale of Last Report			
Principal Place of Business	2a. Mailing Address	4. FEI Number 59 - 34 11661	Applied Fo			

ш			20						_ 3_1 3/11001		I hor Abblicable
22	Sulte, Apt. #, etc.		27	Suite, Apt. #, etc.				5.	Certificate of Status Desired		\$8.75 Additional Fee Required
23	City & State		28	City & State				١.	Election Carripaign Financing Trust Food Contribution		\$5.00 May Be Added to Fees
24	Zip	Country 25	29		Co 30	untry		1	This corporation has liability for Florida Statutes	intangible t] Yes [
	9. Name	and Address of Current	Regis	tered Agent				10.	Name and Address of New Re	gistered A	gent
	AMERILAWYER					81	Name				
	343 ALMERIA A CORAL GABLE					82	Street Address (P.O. Box Number is Not Acceptable)				
						83					· · · · · · · · · · · · · · · · · · ·
						84	City			FL	85 Zip Code
	4 B			07 4500 54 11 01							

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

SIGNATURE	registered agent, or boin, in the state of Floric am familiar with, and accept the obligations of					
12.	Signature, typed or printed name of registered agont and title OFFICERS AND DIREC		ि रित्यू stered Agent signature requir		DATE CONTROL CONTROL CONTROL	
TITLE		DELFTE		ADDITIONS/CHANGES	TO OFFICERS AND DIRECTOR Change	Additio
	PD	[Dett it	1.1 TITLE		Unange	L
AME	MULLINS, ERIC J		1.2 NAME			
TREET ADDRESS	8922 ISLAND BREEZE LANE		1.3 STREET ADDRESS			
ITY-ST-ZIP	TAMPA FL 33637		1.4 CITY - ST - ZIP			
ITLE	(D	☐ DFLETE	2 1 117LE		Change	Additio
AME	JEAN-PIERRE, RODNEY CEO		2 2 NAME			
TREET ADDRESS	8922 ISLAND BREEZE LANE		2.3 STREET ADDRESS			
ITY-ST-ZIP	TAMPA FL 33637		2. 4 CITY - ST - ZIP			
TLE	VSD	☐ DELETE	3 1 TITLE		Change	Addition Addition
AME	SCHUETTE, BRENT		3.2 NAME			
TREET ADDRESS	8922 ISLAND BREEZE LANE		3.3 STREFT ADDRESS			
rTY-ST-ZIP	TAMPA FL 33637		3.4. CITY - ST - ZIP			
TLE		DELETE	4.1 TIFLE		Change	Additio
AME			4. 2 NAME			
TREET ADDRESS			4.9 STREET ADDRESS			
ITY-ST-ZIP			4.4 CITY - ST - ZIP			
TLE		DELETE	5.1 TILLE		Change	Additio
IAME			5.2 NAME			
TREET ADDRESS			5.3 STREET ADDRESS			
HTY-ST-ZIP			5.4 CITY-ST-ZIP			
ITLE		DELETE	6.1 TITLE		Change	Addilio
AME			6.2 NAME			
TREET ADDRESS			6.3 STREET ADDRESS			

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 suppliemental 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 changed, or on an attachment with an address.

SIGNATURE: