

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 16, 1999 8:00 am
Secretary of State

03-16-1999 90040 031 ***150.00

DOCUMENT # P96000098677

1. Corporation Name

CUSTOM DESIGN COMPUTERS, INC.

Principal Place of Business

215 LITHIA PINECREST RD
BRANDON FL 33511-5307

Mailing Address

215 LITHIA PINECREST RD
BRANDON FL 33511-5307

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/02/1996

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc

27 City & State

28 Zip Country

29 30

4. FEI Number

59-3415768

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

JEFFRIES, DAVID M
220 SOUTH FRANKLIN STREET
TAMPA FL 33602

10. Name and Address of New Registered Agent

81 Name

Otte, Alan

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

13604 Pub Place

83

84 City Tampa

FL

85 Zip Code

33624

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

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

3-12-99

DATE

12. OFFICERS AND DIRECTORS

TITLE S ☐ DELETE

NAME JAEGER, CHERYL E
STREET ADDRESS 2825 FAIRWAY VIEW DR
CITY-ST-ZIP VALRICO FL 33594

TITLE T ☐ DELETE

NAME HIMMEL, MARY F
STREET ADDRESS 1011 MORFIELD LN
CITY-ST-ZIP BRANDON FL 33511

TITLE P ☐ DELETE

NAME VERMEULER, MICHAEL A
STREET ADDRESS 845 GREENBELT CIRCLE
CITY-ST-ZIP BRANDON FL 33510

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE ☐ Change ☒ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

CHRISTOPHER W. HAUN
1421 E. 109th Ave.
Tampa - FL - 33612

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michael A. Vermeulen

3/4/99

(813) 684-2816

DATE

Daytime Phone #

CR2E034 (11/98)