

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

FILED
Jul 31 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000002762

1. Corporation Name

SILICA COMPUTER, INC.

Principal Place of Business

**2115 NW 79 AVE
MIAMI, FL 33126**

Mailing Address

**2115 NW 79 AVE
MIAMI, FL 33126**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

1/10/1997

4. FEI Number

65-0722668

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30

☒ Yes

☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

HO, SHEN-TSUNG

**18999 BISCAYNE BLVD, STE 205
NORTH MIAMI BEACH, FL 33180**

10. Name and Address of New Registered Agent

81 Name

RODRIGUEZ, JAVIER F.

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

13205 SW 69 TER

83

84 City

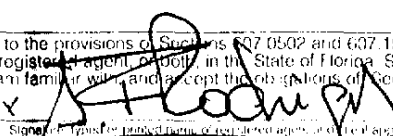
MIAMI

FL

85 Zip Code
33183

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



7/13/98

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☒ DELETE
NAME	HO, SHEN-TSUNG	
STREET ADDRESS	5248 NW 190 LN, MIAMI, FL	
CITY-STATE-ZIP		

TITLE	ST	☒ DELETE
NAME	HO, KATHY	
STREET ADDRESS	5248 NW 190 LN, MIAMI, FL	
CITY-STATE-ZIP		

TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-STATE-ZIP	

21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-STATE-ZIP	

31 TITLE	☐ Change ☒ Addition
32 NAME	PD
33 STREET ADDRESS	RODRIGUEZ, JAVIER F.
34 CITY-STATE-ZIP	13205 SW 69 TER, MIAMI, FL 33183

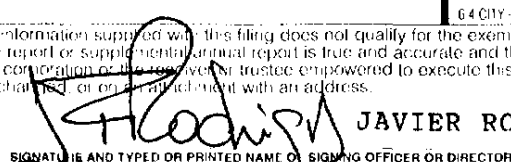
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-STATE-ZIP	

51 TITLE	☐ Change ☐ Addition
52 NAME	100002606331
53 STREET ADDRESS	-08/04/98--01003--025
54 CITY-STATE-ZIP	***550.00

61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-STATE-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 registered 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAVIER RODRIGUEZ

7/13/98

(305)593-8150

Date

Daytime Phone

CR2E034 (10/97)