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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

05-15-1999 90026 007 \*\*\*150.00

May 15, 1999 8:00 am Secretary of State

**FILED** 

1999

DOCUMENT # P97000026368 1. Corporation Name

RCR COMPUTERS, INC.

| Principal Place of | Business |
|--------------------|----------|
| tana e DIVIE IMA   | CTE 700  |

Mailing Address



1320 S. DIXIE-HWY., STE. 700 GORAL GABLES FL-33146 CORAL GABLES EL 33146 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 03/18/1997 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 65-0769825 Not Applicable 26 210 UNIVERSITY 5654 N.W \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5 Certificate of Status Desired Fee Required Suite 502 22 \$5.00 May Be City & State 6. Election Campaign Financing City & State RINGS Added to Fees CORAL Trust Fund Contribution MIAA 23 Country Country Zip 8. This corporation owes the current year Intangible ₽No 33071 USA Personal Property Tax. 30 25 4.2.A 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 MILLEN GORDON, LEWIS G-82 Street Address (P.O. Box Number is Not Acceptable) 1320 S. DIXIE HWY., STE. 700 UNIVERSITY CORAL GABLES FL 33146 83 203 85 Zip Code 32.71 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 boir, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes. OSETH Signature, typed or p NOTE: Registered Agent signatur ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ Addition ☐ DELETE 1.1 TITLE TITLE ROSSY, RICHARD 12 NAME NAME 6721 KINGSMOOR WAY 1.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33014** 1.4 CITY-ST-ZIP CITY-ST-ZIP 4 Change ☐ Addition D. P DELETE 2.1 TITLE TITLE BOODOO, ASHRAM 2.2 NAME NAME 4500 NW 79 AVE. #1A 2.3 STREET ADDRESS STREET ADDRESS MIAMI FL 2.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE ☐ Change ☐ Addition 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition □ DELETE 51 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition 6.1 TITLE DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY-ST-ZIP 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 supplied with this limit does not quality for the exemption of 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:

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