## 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** 

## DOCUMENT # P97000045324

ALIM COMPUTER SERVICES, INC.

1662 PALM LEA	F DRIVE	P O BOX 1977			· .			
BRANDON FL 3		SEFFNER FL 33583						
		U\$		DO NOT WRITE IN THIS SPACE				
:					3. Date Incorporated or Qualif	fedi		j
		4			05/19/1997			
<ol><li>Principal Pl</li></ol>	ace of Business	2a. Mailing Address			4, FEI Number			Applied For
21		26		65-0746722		<u></u>	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	ı 🗅	·	5 Additional
22		27			5. Certificate of Status Busilion	·	Fee	Required
City & State		City & State	City & State		6, Election Campaign Financia	ng		<b>00</b> May Be
23		28	<del>- 1</del>		Trust Fund Contribution Added to Fees			
Zip '	Country Zip		Country		8. This corporation owes the o			
24	25 29 30		0		Personal Property Tax. Yes No			
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of Ne	w Registered A	gent	
	, = , = , = ,		81	Name				
MEEKS, R H			82	82 Street Address (P.O. Box Number is Not Acceptable)				
	N. PARSONS AVENUE	•	"	0.10007.	Garden (i.e. bearing in the tree is			
SUITE E		•	83	Su	1 TE D			
BRANDON FL 33510					112 0	<del></del>	85 2	ip Code
•			84	City		FL	03 4	up code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	the abov	ve-named co	orporation submits this statement for	the purpose of c	hanging	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)  DATE								
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO	OFFICERS AND		
TITLE	PSD	☐ DELETE	1.1 TITLE				Char	ige 🗌 Addition
NAME	ROETTER, MILAGROS L		1.2 NAME	. 1				
STREET ADORESS	1662 PALM LEAF DRIVE		1.3 STREE	ET ADDRESS				İ
CITY-ST-ZIP	BRANDON FL 33510		•					
TITLE			1.4 CITY-3	ST-ZIP				
	VPD	☐ DELETE	1.4 CITY-1 2.1 TITLE	ST-ZIP			☐ Char	ige Addition
NAME	VPD ROETTER, RICHARD A	☐ DELETE					Char	ge Addition
NAME STREET ADDRESS	ROETTER, RICHARD A	☐ DELETE	2.1 TITLE 2.2 NAME		<u></u>		☐ Char	ige
STREET ADDRESS	ROETTER, RICHARD A 1662 PALM LEAF DRIVE	DELETE	2.1 TITLE 2.2 NAME 2.3 STREE	ET ADDRESS			☐ Char	ge Addition
STREET ADDRESS	ROETTER, RICHARD A	DELETE	2.1 TITLE 2.2 NAME	ET ADDRESS			☐ Char	
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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.

SIGNATUR

813654-0452

Mar 24, 1999 8:00 am Secretary of State

03-24-1999 90033 006 \*\*\*150.00