

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

FILED
Apr 10 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P97000046168			
1. Corporation Name RAM Computers Wholesale, Inc.			
Principal Place of Business 8687 Iuy Mill Ct Jacksonville, FL 32244		Mailing Address	
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business 21 8570 Phillips Hwy Suite, Apt. #, etc. 22 115 City & State 23 Jacksonville, FL Zip 24 32256 Country 25 US		2a. Mailing Address 26 SAME Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30	
3. Date Incorporated or Qualified 05/22/97		4. FEI Number 59-3450363	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No			
9. Name and Address of Current Registered Agent TRAVIS GUERRA 8687 Iuy Mill Ct Jacksonville, FL 32244		10. Name and Address of New Registered Agent 81 Name JAMES E. CASTEEL 82 Street Address (P.O. Box Number is Not Acceptable) 8570 Phillips Hwy 83 Suite 115 84 City Jacksonville FL 85 Zip Code 32256	
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: James E. Casteel JAMES E. CASTEEL DATE: 4-2-98			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D P NAME Travis E. Guerra STREET ADDRESS 3401 Chokeberry Ct. CITY-STATE-ZIP Jacksonville, FL 32252		11 TITLE VPS 12 NAME JAMES E. CASTEEL 13 STREET ADDRESS 1460 SUNDWAS PRINGS TAIL 14 CITY-STATE-ZIP Bryceville, FL 32009	
TITLE D NAME Eugene Guerra STREET ADDRESS 1123 W. Ridge Rd CITY-STATE-ZIP Ferguson, NC 28624		21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-STATE-ZIP	
TITLE D NAME Cyvette Guerra STREET ADDRESS 1123 W. Ridge Rd. CITY-STATE-ZIP Ferguson, NC 28624		31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-STATE-ZIP	
TITLE D NAME DR. M. Kilgore Jr STREET ADDRESS 12904 Plantation Bay Rd CITY-STATE-ZIP Jacksonville, FL 32223		41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-STATE-ZIP	
TITLE D NAME Cheryl Kilgore STREET ADDRESS 12904 Plantation Bay Rd CITY-STATE-ZIP Jacksonville, FL 32223		51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-STATE-ZIP	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		61 TITLE 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 supplement to 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.			
SIGNATURE: TRAVIS E. GUERRA		4-2-98 904-732-7596	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

CR2E034 (10/97)