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

Jun 12 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Secretary of State Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** P97000064255 (7) DOUBLE D COMPUTER SERVICE INC. Principal Place of Business Mailing Address 10317 N.W. 33 ST. CORAL SPRINGS FL 33065 10317 N.W. 33 ST. CORAL SPRINGS FL 33065 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>07/24/1997</u> 2. Principa! Place of Business Mailing Address Applied For Not Applicable Suite, Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State \$5.00 May Be Election Campaign Financing Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 30 29 Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DAVILA, THERESA J 10317 N.W. 33 ST. 82 Street Address (P.O. Box Number is Not Acceptable) **CORAL SPRINGS FL 33065** 83 64 City 85 Zip Code 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, Scotten 607.0505, Florida Statutes. Registered Agent signature required when reinstating) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition 1.1 TITLE TITLE NAME 1.2 NAME CR2E034 STREET ADDRESS 1.3 STREET ADDRESS 1.4 CITY - \$1 - ZIP CITY-ST-ZIP DELETE Change Addition 21 TITLE TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP DITTELL Addition 3 1 1111 F TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY - \$T - ZIP 34. CITY-ST-ZIP DELFTE Addition TITLE 4.1 TITLE 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - \$1 - 2IP DELETE 5.1 TITLE Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5 4 CITY-ST-71P DUETE Change ☐ Addition TITLE 6.1 THLE 100002560641 -06/16/98--01053--006 NAME 6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST- ZIP

14. Thereby 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 eath; 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.

***150.00

111118 1998

STREET ADDRESS

CITY-ST-ZIP

FILED