

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

FILED  
Apr 21, 1999 8:00 am  
Secretary of State

04-21-1999 90072 049 \*\*\*150.00

DOCUMENT # P97000069337

1. Corporation Name

AMERICAN COMPUSYSTEMS, INC.

Principal Place of Business

2481-A MC MULLEN BOOTH ROAD  
CLEARWATER FL 34619

Mailing Address

% WALTER SANDERS  
13910 N. DALE MABRY STE 1  
TAMPA FL 33618  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/08/1997

4. FEI Number

59-3463402

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☒ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SANDERS, WALTER  
13910 NORTH DALE MABRY HWY.  
SUITE ONE  
TAMPA FL 33618

81 Name

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

83

84 City

FL

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, Section 607.0505, Florida Statutes.

SIGNATURE

*Walter Sanders* *Walter Sanders*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/8/99

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE

NAME RODRIGUEZ, LUIS  
STREET ADDRESS 312 N. BAY HILLS BLVD.  
CITY-ST-ZIP SAFETY HARBOR FL 34695

1.1 TITLE

☐ Change

☐ Addition

NAME GIVENS, SANDRA  
STREET ADDRESS 2713 BAIRD COURT.  
CITY-ST-ZIP PALM HARBOR FL 34684

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

TITLE D ☐ DELETE

NAME GIVENS, SANDRA  
STREET ADDRESS 2713 BAIRD COURT.  
CITY-ST-ZIP PALM HARBOR FL 34684

2.1 TITLE

☐ Change

☐ Addition

NAME GIVENS, SANDRA  
STREET ADDRESS 2713 BAIRD COURT.  
CITY-ST-ZIP PALM HARBOR FL 34684

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE

☐ Change

☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE

☐ Change

☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE

☐ Change

☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE

☐ Change

☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.2 NAME

6.3 STREET ADDRESS

6.4 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 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.

SIGNATURE:

*Sandra Givens* **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-14-99

Date

727-791-3400

Daytime Phone #

CR2E034 (1/198)