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

PROFIT CORPORATION ANNUAL REPORT

1998

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FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000073914 (8)

DT COMPUTERS, INC.

## FILED Apr 29 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 18554 ANCHOR DRIVE 18554 ANCHOR DRIVE **BOCA RATON FL 33498** BOCA RATON FL 33498 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/25/1997 Principal Place of Business 18554 HN CHC/2 DAWE 26 2a. Mailing Address Applied For Same Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State \$5.00 May Be 6, Election Campaign Financing CARATON, 11: 33491 23 Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible 3498 25 Palm Beach. 24 Yes Personal Property Tax due June 30. 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 TRAN, DUONG N 18554 ANCHOR DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33498** 83 84 City Zip Code 11. Pursuant to the provisions of Sections 6070502 and 607.1508, Florida Statules, 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 familia with, and accept the obligations of. Section 607.0505, Florida Statutes.

SIGNATURE

SIGNATURE

SIGNATURE SIGNATURE (NOTE: Registered Agent signature required when reinstating) same of registered agent and blk-if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DEL ETE Addition TITLE 1.1 TITLE Change TRAN, DUONG N NAME 1.2 NAME **18554 ANCHOR DRIVE** STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL 33498** CITY-ST-ZIP 1.4 C(TY - ST - Z(P DELETE Change Addition TITLE 2.1 TITLE NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE ☐ Change ☐ Addition 3.1 TITLE NAME 3.2 NAME **STREET ADDRESS** 3.3 STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-ZIP Change TITLE DELETE 4.1 THLE ■ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 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 suppliemental 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 altra-innent with an address.

78 cm Mes NUMIC N TRAN

4/97/98