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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700083761 (1)

EP COMPUTER SOLUTIONS, INC.

Principal Place of Business

Mailing Address

## FILED Apr 14 1998 8:00am Secretary of State

1004 000-1229



4 NE 7TH ST		4 NE 7TH ST			
DELRAY BEACH FL 33444		DETHAT BEACH E	DELRAY BEACH FL 33444		DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
					09/26/1997
2. Principal Pla	ce of Business	2a. Mailing Addres	s		4. FEI Number Applied For
21		26			65-0790698 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, e	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
22		27			Fee Required
City & State		City & State	City & State		6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	<b>Ζ</b> φ	Coun	lry	8. This corporation owes or has paid the current year Intangible
24	25	29	30	·	Personal Properly Tax due June 30. Yes No  10. Name and Address of New Registered Agent
	9. Name and Address of Co	urrent Registered Agent		1 Name	
	T, MARIA LUISA		Name		·
	7TH ST		82 Street Ad		t Address (P.O. Box Number is Not Acceptable)
DELI	RAY BEACH FL 33444		83		
			ľ	<sup>3</sup>	
			ļa	4 City	85 Zip Code
					FL   s   z p cooe
11. Pursuant to	the provisions of Sections 607 distered agent, or both, in the l	7.0502 and 607.1508, Florida State of Florida. Such change	Statutes, the abo was authorized	ove-named by the cor	d corporation submits this statement for the purpose of changing its registered reporation's board of directors. I hereby accept the appointment as registered
agent I am	familiar with, and accept the	obligations of, Section 607.05	05, Florida Statu	es.	poration's board of directors. I hereby accept the appointment as registered
SIGNATURE _			<del></del>		
<del></del>	gnature, typed or printed name of register	ed agent and title if applicable  S AND DIRECTORS	(NOTE: Registered a	Agent Bignatur	re required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	Crricen	DELE		<del></del> .	P , Change K Addition
NAME			1.2 NAME		MARIA PIRET
					11. 15 305
STREET ADDRESS			1.3 STREET ADDRESS		DELEAY BEACH, FL 33444
CITY-SI-ZIP TITLE		T DELE	1.4 C(1Y - ST - Z(P)  DELETE 2.1 TITLE		VP Change X Addition
NAME			2.2 NAN		VINICIO ESPINEL
STREET ADDRESS					1/ 7 6 - 1
					DELPAY BEACH, FL 33444
CITY-ST-ZIP TITLE		DELF			Change Addition
1		C 0611	3.2 NAN		J. State of the st
NAME CIDERT ADDRESS				E1 ADDRESS	
STREET ADDRESS					
CITY-ST-ZIP TITLE		DELF		/-ST-ZIP	Change Addition
			4, 2 NAI		
NAME					
STREET ADDRESS				ET ADDRESS	
CITY-ST-ZIP		DELE		-\$1-ZIP	Change Addition
TITLE		[ D.C.C.			, Change Carlotten
NAME 070557 4 DDD5555			5.2 NAN		
STREET ADDRESS				ET ADORESS	
CITY-ST-ZIP		DELE		- ST - ZIP	Change Addition
TITLE		C) DELE			Change Addition
NAME			6.2 NAM		
STREET ADDRESS				ET ADDRESS	
CITY-ST-ZIP	tifuthat the information assessi	ad with this filing door not a		-ST-ZIP	ted in Section 119.07(3)(i), Florida Statutes. I further certify that the information
THE THEIRDY CO	rmy macino information suppli	ou with this ming does not gu	ad accurate and	ipriori stat	and in occion 113.07(0)(), Formula districts i fundo under orbit that I man

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.

= /m1 4/2/ax