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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998 DOCUMENT # P9700085118 (2)

BCM COMPUTER INC.

Principal Place of Business Mailing Address

FILED May 04 1998 8:00am Secretary of State



9501 ARLINGTON EXPRESS WAY #870 JACKSONVILLE FL 32225-8243		9501 ARLINGTON EXPRESS WAY #870 JACKSONVILLE FL 32225-8243		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/29/1997		
	ace of Business Charwad Or	2a. Mailing Address	leant De	4. FEI Number	Applied For	
Suite, Api. 6		Suite, Apt. #, etc.	hurwood Dr	5. Certificate of Status Desired	Not Applicable \$8.75 Additional	
City & State		City & State			Fee Required	
7011	han Flotidh	28 CG//4hn1	Florido	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 3人U	Country 25 V S A	29 3201/ 3	Country	 This corporation owes or has paid the Personal Property Tax due June 30. 	☑ Yes ☐ No	
	9. Name and Address of Currer	nt Registered Agent	81 Name	10. Name and Address of New Register	red Agent	
RIDDLE, CLIFFORD A 4818 CHARWOOD DRIVE CALLAHAN FL 32011						
			82 Street Address (P.O. Box Number is Not Acceptable)			
•			83			
			84 City		85 Zip Code	
34 D	a the eventaines of Continue CO7 050	22 and CO7 1500. Florida Cial tax		d corporation submits this statement for the purpos	-L	
office or re agent. I an	othe provisions of sections 607.050 egistered agent, or both, in the State in lamiliar vitty, and accept the oblig	of forda. Such change was autanties, sof, Section 607.0505, Floridation 607.0505,	horized by the cor da Statutes.	poration's board of directors. I hereby accept the	appointment as registered	
SIGNATURE :	Signature, typed by printed name of registered ag	en and title if applicable (NOTE: F	Registered Agent stonature	e required when reinstaling) DA1	-1- 90 1E	
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12	
TITLE		DELETE	1.5 TITLE	clicand A Riddle	Change Addition	
NAME			1.2 NAME	clifford A Ridge		
STREET ADDRESS			1.3 STREET ADDRESS	4518 Charmad Dr Callahap F1 32011		
CITY-ST-ZIP TITLE		DELETE	1.4 CITY - ST - ZIP 2.1 TITLE	Callakan Fl 32011	Change 2 Addition	
NAME		□ veete	2.2 NAME	V President	Undergo Englishment	
STREET ADDRESS			2.3 STREET ADDRESS	mike Gordon Dr 4818 Charwood Dr		
CITY-ST-ZIP			2. 4 CITY - ST - ZIP	Chillapso F1 32011		
TITLE		☐ DELETE	3.1 TITLE		Change Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition	
NAME		Detaile	4.7 MLE		Ontinge Indenterin	
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY - ST - ZIP			
TITLE		☐ DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME	1		
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP		F1	5.4 CITY-ST-ZIP		D 0 D 4420	
TITLE		L DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
14. I bereby c	ertify that the information supplied y	with this filing does not qualify for	6.4 CITY-ST-ZIP	ed in Section 119.07(3)(i), Florida Statutes. I furthe	er certify that the information	
indicated of	on this annual report or supplement	al annual report is true and accur eiver or trustee empowered to ex-	ate and that my sid	gnature shall have the same legal effect as if mads s required by Chapter 607, Florida Statutes; and the	e un de r oath; that I a m an nat my name appears in	