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

SIGNATURE:

PROFIT ELORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State **19**98 DIVISION OF CORPORATIONS DOCUMENT # P97000085246 (1) LOGOS COMPUTERS INC. Principal Place of Business Mailing Address 8315 N.W. 64TH STREET 8315 N.W. 64TH STREET STE 6 STE 6 DO NOT WRITE IN THIS SPACE MIAMI FL 33166 MIAMI FL 33166 3. Date Incorporated or Qualified 10/02/1997 2. Principal Place of Business 2a. Mailing Address Applied For 21 Not Applicable 26 Suite, Apt #, etc Suite, Apt. #Leto \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Country Zıp Country 8. This corporation owes or has paid the current year intangible Yes Personal Property Tax due June 30. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 LISBOA, CESAR J 7925 N.W. 12TH STREET 82 Street Address (P.O. Box Number is Not Acceptable) **STE 324** 83 **MIAMI FL 33126** Zip Code 84 City 85 11. Pursuant to the provisions of section office or registered agent, or both agent. I am fanction with, and accept and 607,0502 and 607,1508, Florida Statules, the above named corporation submits this statement for the purpose of changing its registered the State of Florida State change was authorized by the corporation's board of directors. I hereby accept the appointment as registered of dilectors, of Section 607,0505, Florida Statutes SIGNATURE (NOTE Begintered Agent size abuse required when reinstating) 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change DETETE Addition TITLE LISBOA, CESAR J 1.2 NAME NAME CR2E034 8315 N.W. 64TH STREET 1.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33166** CITY-ST-7IP 1.4 CHY-ST 7/P DETETE Change Addition THE 24 THEF NAME 2.2 NAMI STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 City - S1 - 7IP DLLETE Change Addition TITLE 3 1 11108 NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZiP 3.4 CITY - \$1 - ZIP DELETE Change Addition TITLE 4.1 TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST - ZIP TIELETE ☐ Change Addition 5.1 1111.6 NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - 7IP DELETE Change Addition TITLE G.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADORESS 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 supplied can annual report is true and occurred 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 true receiver or trustice 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 allegiptions with an address