**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.**
**AMOUNT DUE ON OR BEFORE 09/30/98: $550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $750).**

FILED
Sep 30 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
**1998**

FLORIDA DEPARTMENT OF STATE
**Sandra B. Mortham**
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000088228

1. Corporation Name
VIRTUAL COMPUTERS, INC

| Principal Place of Business | Mailing Address |
|---|---|
| 3580 NW. 204 TR<br>MIAMI, FL 33056 | 3580 NW 204 TR.<br>MIAMI, FL 33056 |

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 3580 NW 204 TR
22
City & State
23 MIAMI FL
Zip 24 33056 Country 25 U.S.A

2a. Mailing Address
26 3580 NW 204 TR
27
City & State
28 MIAMI, FL
Zip 29 33056 Country 30 U.S.A.

3. Date Incorporated or Qualified 10/97

4. FEI Number 65-0186796 ☐ 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 or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

Maria Lorena Cordero
3580 NW 204 TR
Miami, FL 33056

10. Name and Address of New Registered Agent

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 Maria L. Cordero 9.17.98
Signature, typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent's signature required when reinstating) DATE

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|---|---|---|---|
| TITLE | Secretary ☒ DELETE | 1.1 TITLE | ☐ Change ☐ Addition |
| NAME | Maria L. Cordero | 1.2 NAME | |
| STREET ADDRESS | 3580 NW 204 TR | 1.3 STREET ADDRESS | |
| CITY-ST-ZIP | Miami, FL 33056 | 1.4 CITY-ST-ZIP | |
| TITLE | President ☐ DELETE | 2.1 TITLE | ☐ Change ☐ Addition |
| NAME | Silvio Ferreira | 2.2 NAME | |
| STREET ADDRESS | 3580 NW 204 TR | 2.3 STREET ADDRESS | |
| CITY-ST-ZIP | MIAMI, FL 33056 | 2.4 CITY-ST-ZIP | |
| TITLE | ☐ DELETE | 3.1 TITLE | ☐ Change ☐ Addition |
| NAME | | 3.2 NAME | |
| STREET ADDRESS | | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 3.4 CITY-ST-ZIP | |
| TITLE | ☐ DELETE | 4.1 TITLE | ☐ Change ☐ Addition |
| NAME | | 4.2 NAME | |
| 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 | 000002653990 |
| STREET ADDRESS | | 5.3 STREET ADDRESS | -10/02/98--01020--005 |
| CITY-ST-ZIP | | 5.4 CITY-ST-ZIP | ***550.00 |
| TITLE | ☐ DELETE | 6.1 TITLE | ☐ Change ☐ Addition |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 6.4 CITY-ST-ZIP | |

JK 9-30

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.

SIGNATURE: Silvio Ferreira 9.17.98 (305) 324-6008

CR2E034 (5/98)