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 # P97000088593 (3)

STS COMPUTERS OF FLORIDA, INC.

FILED May 01 1998 8:00am Secretary of State



Principal Place of Business		Mailing Address			i inacides the (Atti (Anti Anti Anti Anti Anti	ABIDI (ALĞI 1215)			
1842 PATTERSON AVE., STE. N-S DELAND FL 32724		1842 PATTERSON AVE., STE. N-5 DELAND FL 32724							
					DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qualified				
					10/13/1997				
2. Principal Place of Busin		2a. Mailing Address		,	4. FEI Number		App	olied For	
21 1501 Rido	30 wood 57.	26 1501 Rid	9.24	01457	59-347369	46	Not	Applicable	
Suite, Apt. #, etc.	•	Suite, Apt. #, etc.	•		5. Certificate of Status Desired		3.75 A Fee Rec	dditional quired	
City & State 23 DeLAND	FL	City & State 28 Dr Land	FL	•	6. Election Campaign Financing Trust Fund Contribution		5.00 i		
Zip	Country	Zip	Cour		8. This corporation owes or has paid	the current y	ear Inta	ngible	
24 32720	25 U.S.A.	29 32720	30	USA	Personal Property Tax due June 3			No	
	and Address of Current	Registered Agent			10. Name and Address of New Regi	stered Agen	<u>t</u>		
avery, Jose			ł	81 Name					
1501 RIDGEWOOD ST.					32 Street Address (P.O. Box Number is Not Acceptable)				
DELAND FL 3:	2720		Ļ						
				83					
			 	64 City		 85	Zip C	ode	
						FL "	<u> </u>		
office or registered ag	ient, or both, in the State (o! Florida. Such change was :	authorized	l by the corporat	poration submits this statement for the pur tion's board of directors. I hereby accept	pose of char the appointm	nging its nent as r	registered eaistered	
agent. I am familiar wi	th, and accept the obliga	tions II, Section 607.0505, FI	orida Stati	ites	· '	11 Z.	6	e l	
SIGNATURE Signature, typed	Sinned name of registered agen	wers-	I . De mateur d	Agent signature requir		1/22	19	6	
12.	OFFICERS AND		13.	Agor: aignature requi	ADDITIONS/CHANGES TO OFFICE	RS AND DIRE	CTORS	IN 12	
TITLE Direct		DELETE	1.1 TIT	LE			hange	IN 12 Addition	
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	UL, FL 3	2724	1.4 017	Y-ST-ZIP					
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STREET ADDRESS				REE1 ADDRESS					
CITY-ST-ZIP			6.4 CIT	Y - ST - ZIP					

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 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.