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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortfam

FILED

Apr 30 1998 8:00am

Secretary of State

A CONTRACTO DE CARTO CONTRACTO DE CONTRACTO

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000091791 (8)

ACADEMIC COMPUTER COPORATION

Principal Place of Business Mailing Address					#1#1 ***** ** ** **	75-21 110057
10209 SPYGLASS WY BOCA RATON FL 33498 BOCA RATON FL 33498				DO NOT WRITE IN THE	S SPACE	
				3. Date Incorporated or Qualified		
				10/23/1997		
2. Principal Place of Business	2a. Mailing Address			4. FEI Number 790284	- +	Applied For
21 26 Control Market				63-077007		Not Applicable
Suite, Apt. #, etc Suite, Apt. #, etc. 27				5. Certificate of Status Desired		5 Additional Required
City & State City & State				6. Election Campaign Financing		O May Be
23	28	1 2		Trust Fund Contribution		ed to Fees
Zip Country	Zιρ	Countr	У	8. This corporation owes or has paid the current year Intangible		
24 25	29	30		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent		
9, Name and Address of Current Registered Agent DAN7 AU IDDAY A 81 Name				10. Hame and Address of low nogletated Agent		
DANZ, MURRAY A 10209 SPYGLASS WY				DO DO NOTE OF THE PROPERTY OF		
BOCA RATON FL 33498		82		ess (P.O. Box Number is Not Acceptable)		
		83				
		84	City	<u> </u>	85 Z	ip Code
11. Pursuant to the provisions of Sections	607 0502 and 607 1508 Florida Statu	ies the abov	e-named corp	oration submits this statement for the purpose	<u> </u>	a its registered
office or registered agent, or both, in tagent. I am familiar with, and accept t	he State of Florida. Such change was:	authorized h	v the corporati	ion's board of directors. I hereby accept the aj	ppointment	as registered
SIGNATURE						_
Signatura, typed or printed name of re-			ent signature require	ed when reinstating) DATE		
TITLE PRESIDENT	ERS AND DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	
NAME TRENE DAN		1.1 HILE 1.2 NAME			L_1 CHAIN	e CT Addition
مراضة فالتناا	IASS WAY					
STREET ADDRESS 10V09 3776	1 C 23 U98		T ADDRESS			
CITY-SI-ZIP BOCA RATON TITLE SECY-TREA	DELETE	1.4 CITY - ST - ZIP 2 1 TITLE			Change	e Addition
NAME MURRAY DA	Later -	2.2 NAME				E [_] AUGINION
AMERICA AND AND AND AND AND AND AND AND AND AN	Line in a price pare supply		* **********			
STREET ADDRESS 10209 3P76	1 El 72 V98		T ADDRESS			
TITLE	I DELETE	2.4 CITY- 31 TITLE	S1-ZIP		Change	e Addition
NAME	C onch	3.2 NAME			L comity	
STREET ADDRESS			T ADDRESS			
CITY-ST-ZIP		3.4. CITY	Į.			ļ
TITLE			21.71		Change	e . Addition
NAME	_ 5,	4.1 TITLE 4. 2 NAME			پرس <u>ب</u>	
STREET ADDRESS			T ADORESS			
CITY-ST-ZIP		4.3 SINCE				ļ
MTLE	DELETE	5.1 TITLE	21.7lt		Change	e Addition
NAME	_ 5	5.2 NAME				
STREET ADDRESS			T ADDRESS			
			!			
CITY-ST-ZIP	DELETE	5.4 CITY - 6.1 TITLE	01-1tr		Change	e Addition
NAME	المام	6.2 NAME			0,	
			T ADODECC			,
STREET ADDRESS CITY-ST-7IP		6.3 STREE	T ADORESS			
I GIT-01-48"		■ 04UIIY-	51-7IF I			,

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 supplieriental 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:

SIGNA