## 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

<u>19</u>98

DOCUMENT # P97000104326 (8)

AMERICAN COMPUTER AND TELECOMM, CORP.

## FILED May 13 1998 8:00am Secretary of State

Principal Place of Business Mailing Addross								48 <b>41100</b>	
8005 SILVER STAR RD		6005 SILVER STAR RD	<u>u</u>						
ORLANDO FL 32808		ORLANDO FL 32808							
						DO NOT WRITE IN THIS SPACE			
	•					<ol> <li>Date Incorporated or Qualified</li> <li>10/14/1007</li> </ol>			
9 Principal Pi	ace of Business	2a. Mailing Address				12/11/1997 4, FEI Number			oplied For
21 Frillicipal Fr	SCO OF DOSHIESS	26. Walling Address	<b>¬</b>			59-3483215		<del></del>	of Applicable
Sulte, Apt. #, etc.		Suite, Apl. #, etc.						\$8.75	
<del>-</del>		27	7			<ol><li>Certificate of Status Desired</li></ol>		Fee Re	
City & State		City & State				6. Election Campaign Financing		\$5.00	May Be
23		28				Trust Fund Contribution			to Fees
Zip	Country	Zip	Coun	itry		8. This corporation owes or has p			
24	25	29 30	)			Personal Property Tax due Jun			J No
	9. Name and Address of Curren	I Hegistered Agent		1 18	Name	10. Name and Address of New F	egisterec	Agent	
RHYMER, JUDITH 6005 <b>S</b> ILVER STAR RD			ľ	" '	Name				
		82 Street Addr			ss (P.O. Box Number is Not Accepts	ıble)			
Un	LANDO FL 32808		1	33					
			L						
			[8	34 (	City		FL	85 Zip	Code
11. Pursuant t	o the provisions of Sections 607.050	2 and 607.1508, Florida Statutes,	the abo	ove-n	amed corpor	ration submits this statement for the	purpose o	f changing it	ts registered
office or re	egistered agent, or both, in the State in familiar with, and accept the obligi	of Florida, Such change was auti	horized la Statu	by th	ne corporatio	n's board of <b>d</b> irectors. I hereby acco	opt the app	ointment as	registered
-	The transfer was a secretary to the consequences	anna or, accordin correspon, mone	ia otata	toti.					1
SIGNATURE	Signature, typed or printed name of registered agr	no and title diapplicative (NOTE: R	egistered :	Agent s	signature required	when reinstating)	DATE		]
12.	OFFICERS AN		13.			ADDITIONS/CHANGES TO OFF	ICERS AN		
TITLE	D DATE DATE OF TO	☐ DELETE	1.1 T(T).					☐ Change	Addition
NAME	RHYMER, RALPH S JR		1.2 NAN	-					į
STREET ADDRESS	PO BOX 161063 N/A	710	1.3 STR		- 1				ļ
CITY-ST-ZIP	ALTAMONTE SPRINGS FL 32	7 10	1.4 CITY		ZIP			Change	Addition
TITLE	RHYMER, JUDITH M	C. DELETE	2.1 TITLE 2.2 NAME					- CHARRING	Magnigan
NAME	6005 SILVER STAR RD				DDECC				
STREET ADDRESS	ORLANDO FL 32808		2.3 STR 2. 4 CIT						
CITY-ST-ZIP TITLE	71.541.5511.5500	DELETE	3.1 TITL		ZIF			Change	Addition
NAME			3.2 NAN		-				_
STREET ADDRESS			3.3 STR		DRESS				
CITY-ST-ZIP			3.4. CIT	Y - ST - 7	Z∤P				
TITLE		☐ DELETE	4.1 TITLE					Change	Addition
NAME			4. 2 NA	ME					
STREET ADDRESS			4.3 STR	EET ADI	DRESS				
CITY-ST-ZIP			4.4 CITY	/-ST-Z	IP .				
TITLE	DELETE 5.1		5.1 TITL	5.1 TITLE				☐ Change	Addition
NAME			5.2 NAM	4E					
STREET ADDRESS			5.3 STR	EET ADI	DRESS				
CITY-ST-ZIP			5.4 CITY		NP I			<del></del>	
TITLE		☐ DELETE	6.1 TITL					Change	Addition
NAME			6.2 NAM						
STREET ADDRESS			6.3 STR						
CITY-ST-ZIP	and that the information as	10 44 is file and a second second	6.4 CITY			nation 110 07/2Vi) Florida Ctatutas	I further =	artific that the	Information

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 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 trusted 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 on a supplemental with an address.