Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90262 027 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000104326

AMERIC/	AN COMPUTER AND TELE	COMM, (CORP.						
Principal Place	e of Business	Mailin	ng Address				- 4 1881(88) (18 1811) 1881) 88111 88111 88111	1 00111 01000 11410)
6005 SILVER STAR RD 6005 SILVER STAR RD									
ORLANDO FL 3			IDO FL 32808						
)							DO NOT WRITE IN THI	S SPACE	
·	en was a second		200			-	3. Date Incorporated or Qualifed 12/11/1997	-	
2. Principal Place of Business			a. Mailing Address				4. FEI Number	₽ Ar	oplied For
21	•	26					59-3483215	No	ot Applicable
Suite, Apt.	#, etc.	St	uite, Apt. #, etc.				5. Certificate of Status Desired	T	Additional
22		27					5. Certificate of Status Desired	Fee Re	equired
City & Stat	e	C	ity & State	-			6. Election Campaign Financing	\$5.00	May Be
23		28	•				Trust Fund Contribution	Added	to Fees
Zip	Country	Zi	p	Cour	ntry		8. This corporation owes the current year I	ntangible	
24	25	29		30			Personal Property Tax.	ŬYes	□No
<u>1</u>	g. Name and Address of Curre		ed Agent				10. Name and Address of New Registered	d Agent	
	<u> </u>				81 Nan	ne			
RHYMER, JUDITH					82 Stre				
	6005 SILVER STAR RD					et Addre	ess (P.O. Box Number is Not Acceptable)		
ORLANDO FL 32808					83				
0112	, 1150 (E OLOGO				83				
				1	84 City		F	ᆸᆝᅦ	Code
11. Pursuant office or r agent. I a							oration submits this statement for the purpose on's board of directors. I hereby accept the appropriate of the purpose of the	of changing its pintment as re	; registered ;gistered
	Signature, typed or printed name of registered ag			-i	Agent signall	ne required		ND DIDECT	ODE IN 12
12.	OFFICERS A	ND DIRECT	□ DELETE	13.			ADDITIONS/CHANGES TO OFFICERS A	Change	Addition
TITLE	D DATE DATE OF THE STREET		I'' DEFEIE	1.1 TITI			•		
NAME	RHYMER, RALPH S JR			1.2 NAJ		ļ			
STREET ADDRESS	PO BOX 161063 N/A			1.3 STF	REET ADORE	ss			
CITY-ST-ZIP	ALTAMONTE SPRINGS FL 327	716		1.4 CIT	Y-ST-ZIP				
TITLE	D	·	☐ DELETE	2.1 TITI	£			Change	Addition
NAME	RHYMER, JUDITH M	.*	* - 5	2.2 NA	ME	1		•	
STREET ADDRESS	6005 SILVER STAR RD			2.3 STF	REET ADDRE	ss			
CITY-ST-ZIP	ORLANDO FL 32808			2.4.00	Y-ST-ZIP				
TITLE			☐ DELETE	3.1 1111				Change	Addition
NAME				3.2 NA	ME.				
\					™_ REET ADDRE	ee			
STREET ADDRESS						33			
CITY-ST-ZIP_			G DELETE	_	Y-ST-ZIP			☐ Change	Addition
TITLE			☐ DELETE	4.1 TITI					
NAME				4. 2 NA	ME	- {			
STREET ADDRESS				4.3 STF	REET ADDRE	ss			
CITY-ST-ZIP				4.4 C/T	Y-ST-ZIP_				
TITLE		_	☐ DELETE	5.1 TITI	LE			☐ Change	☐ Addition

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, with all other like empowered.

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE:

NAME

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

Change

Addition