

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

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra S. Northington
Secretary of State
DIVISION OF CORPORATIONS

FILED

00 MAY -3 AM 9:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000107211
1. Corporation Name
Jasmine Computer Company

Principal Place of Business
4149 Town Center Blvd
Orlando - FL 32837
Mailing Address
4149 Town Center Blvd
Orlando - FL 32837

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	3a. Date of Last Report
21. State Apt # etc	2a. State Apt # etc	59-3480866	
22. City & State	27. City & State	6. Certificate of Status Desired	Applied For Not Applicable
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution	\$8.75 Additional Fee Required
24. Country	29. Country	8. This corporation has liability for intangible tax under s. 189.032, Florida Statutes	\$5.00 May Be Added to Fees
			☐ Yes ☐ No

8. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
ALI ZARAZEL 4149 Town Center Blvd Orlando - FL 32837	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: Ali Zarazel DATE: 4/24/00

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	☐ DELETE	1. TITLE	☐ Change ☐ Addition
NAME		2. NAME	
STREET ADDRESS		3. STREET ADDRESS	
CITY ST ZIP		4. CITY ST ZIP	
TITLE	☐ DELETE	21. TITLE	☐ Change ☐ Addition
NAME		22. NAME	
STREET ADDRESS		23. STREET ADDRESS	
CITY ST ZIP		24. CITY ST ZIP	
TITLE	☐ DELETE	31. TITLE	☐ Change ☐ Addition
NAME		32. NAME	
STREET ADDRESS		33. STREET ADDRESS	
CITY ST ZIP		34. CITY ST ZIP	
TITLE	☐ DELETE	41. TITLE	☐ Change ☐ Addition
NAME		42. NAME	
STREET ADDRESS		43. STREET ADDRESS	
CITY ST ZIP		44. CITY ST ZIP	
TITLE	☐ DELETE	51. TITLE	☐ Change ☐ Addition
NAME		52. NAME	
STREET ADDRESS		53. STREET ADDRESS	
CITY ST ZIP		54. CITY ST ZIP	
TITLE	☐ DELETE	61. TITLE	☐ Change ☐ Addition
NAME		62. NAME	
STREET ADDRESS		63. STREET ADDRESS	
CITY ST ZIP		64. CITY ST ZIP	

14. I do 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 in an attachment with an address.

SIGNATURE: Ali Zarazel DATE: 4/24/00 KEY: 407-858-4282