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

PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Katherine Harris ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1999 99 JUN 25 PM 2: 32 DOCUMENT # Ly Oak Computers, Inc.

Bronough St.

Lasse, FC 32301 SECRETALLY OF STATE TALLAHASSEE, FLORIDA DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 2. Principal Place of Business
21 608 N. Bronoval 2a. Mailing Address Applied For 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State \$5.00 May Be Election Campaign Financing Trust Fund Contribution Added to Fees 28 Country Zip Country 8. This corporation owes the current year Intangible Personal Property Tax. []Yes 25 29 30 Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name Avenue Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code ons 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered in the State of Figure 2. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered myte obligations of Section 607.0505, Florida Statutes. 11. Pursuant to the pro-office or registered agent. I am familiar SIGNATURE (NOTE: Registered Agent signature required when reinstating) R2E034 (11/98 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 S AND DIRECTORS 12 13. DELETE []] Change Addition 1.1 TITLE TITLE 1.2 NAME NAME 1.3 STREET ADDRESS STREET ADDRESS 14 CITY-ST-ZIP CITY-ST-ZIP **70**00029169**@**7⁰³⁴⁶**©** -06/25/99--01081--018 TITLE 21 TITLE 22 NAME NAME ****150.00 ****150.00 23 STREET ADDRESS STREET ADDRESS CITY-\$T-ZIP 2 4 CITY-ST-ZIP [] Addition ☐ DELETE □ Change 31 TITLE TITLE 32 NAME NAME 33 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP [] Change Addition DELETE 4.1 TITLE TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE [] Change ☐ Addition 51 TITLE TITLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 City-ST-ZiP CITY ST ZIP 6.1 TITLE □ DELETE [] Change Addition TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY-ST-ZIP CITY-ST-ZIP 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 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 and are in Block 12 or Block 13 if changed, or on an attachment with an appears, with all other like empowered. SIGNATURE:

Dayti ne Phone



Computer Sales • Service • System Design • Networking

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

June 23, 1999

To whom it may concern:

I recently found out that I have missed a deadline for filing my corporate annual report. I contacted your office to determine how this happened and we determined that I never received a packet in the mail regarding this matter. You staff member said that I could write a letter to that effect and the late filing fee will probably be excused.

Please note that this is a new corporation and this is the first time we have ever had to file this document. We will make every effort to be aware of the May 1st deadline in 2000. I have enclosed the completed form and a check for \$150.

Please let me know if you cannot excuse the late filing fee.

Sincerely

John McBride

President