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

FILED Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90020 049 ***150.00

I. Corporation	MENT # P9800(NPUTER (MIAMI), INC.)020171						
D.: -:! Di	(D	Maitine Address		—		}		
Principal Place of Business Mailing Address								
2184 N W 89 PLACE 2184 N W 89 PLACE MIAMI FL 33172 MIAMI FL 33172								
	•					DO NOT WRITE IN TH	IS SPACE	
						3. Date Incorporated or Qualifed		
						03/03/1998 4. FEI Number		olied For
	lace of Business	2a, Mailing Address				52-2090304	<u> </u>	Applicable
Suite, Apt.	# etc	26 Suite, Apt. #, 6	etc.				\$8.75 A	
22		27				5. Certificate of Status Desired	Fee Re	
City & State City & State						6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution	Added to	Fees
Zip	Country	Zip		untry		8. This corporation owes the current year		
24	25	29	30			Personal Property Tax.		□No
·	g. Name and Address of Curre	ant Registered Agent		81	Name	10. Name and Address of New Registere	u Ayent	
WU.	AI-LAN							
2184 N W 89 PLACE				82	Street Add	ress (P.O. Box Number is Not Acceptable)		
MIAMI FL 33172				83				
							nel 7:- C	'ada
				84	City	F	L 85 Zip C	ode
office or r	egistered agent, or both, in the Stat m familiar with, and accept the oblig Signature, typed or printed name of registered as	te of Florida. Such change gations of, Section 607.05	e was authorize 505, Florida Sta	ed by to	the corporati	poration submits this statement for the purpose ion's board of directors. I hereby accept the appear when reinstating)	ointment as reg	gistered
12.	OFFICERS A	AND DIRECTORS	13			ADDITIONS/CHANGES TO OFFICERS		
TITLE	D ,	□ D€I	LETE 1.17	TITLE				
NAME	WU, AI-LAN						☐ Change	Addition
STREET ADDRESS	2624 BAREFOOT LANE			NAME			☐ Change	Addition
CITY-ST-ZIP TITLE		40	1.3 5	STREET	ADDRESS		☐ Change	Addition
IIILE	ROWLAND HEIGHTS CA 917		1.3 S 1.4 C	STREET.	1			Addition
	ROWLAND HEIGHTS CA 9174	48 □ DEI	1.3 S 1.4 C LETE 2.1 T	STREET. CITY-ST	1		☐ Change	
NAME	ROWLAND HEIGHTS CA 9174		1.3.5 1.4.0 LETE 2.1.7 2.2.1	STREET. CITY-ST TITLE NAME	-ZIP	· · · · · · · ·		
NAME STREET ADDRESS	ROWLAND HEIGHTS CA 9174		1.3 \$ 1.4 C LETE 2.11 2.2 P	STREET. CITY-ST TITLE NAME	-ZIP ADDRESS			
NAME	ROWLAND HEIGHTS CA 9174		1.35 1.40 LETE 2.11 2.21 2.35 2.41	STREET. CITY-ST. TITLE NAME STREET	-ZIP ADDRESS	· · · · · · · · · · · · · · · · · · ·		
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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.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date