PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

FILED Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90110 050 ***150.00

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P98000022549**1. Corporation Name

PRIMETECH COMPUTER SOLUTIONS, INC.

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Principal Plac	e of Business	Mailing Address					ierrā ciātā armes matra	21818 (\$11 13P1
225 S ADAMS STREET 225 S ADAMS STREET								
STE 200 STE 200					DO NOT WRITE IN THIS SPACE			
TALLAHASSEE FL 32301 TALLAHASSEE FL 32301						DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified		
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		Ma Malli - Address				03/10/1998 4. FEI Number	Tan	plied For
— · · ·	Place of Business	2a. Mailing Address				59-3500571	<u> </u>	t Applicable
21		Suite, Apt. #, etc.					\$8.75	
Suite, Apt.	. #, etc.	<u>├</u>			i	5. Certificate of Status Desired	Fee Re	
22 City & Stat	<u></u>	27				6. Election Campaign Financing	\$5.00	
23		28	•			Trust Fund Contribution	Added t	
Zip	Country	Zip	Cou	intry		8. This corporation owes the current year		
24	25	29	30	•		Personal Property Tax.	Yes	□No
27	9. Name and Address of Current		1-51	Γ		10. Name and Address of New Registe	red Agent	
				81 Nam	е		_	
YOU	JNG, ROY C			82 Stre	nt A delena	ss (P.O. Box Number is Not Acceptable)		
225	S ADAMS STREET			DZ SPE	ai Aomei	SS (P.O. BOX HUMBER IS NOT PLUEDIAME)		1
	200			83				
TAL	LAHASSEE FL 32301						11 1	
1				84 City			FL (85) Zip (code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statu	ites, the s	bove-name	ed corpor	ration submits this statement for the purpos	e of changing its	registered
office or i	registered agent, or both, in the State of	f Florida. Such change was	authorize	d by the co	rporation	's board of directors. I hereby accept the a	ppointment as re	gistered
	in lamiliar with, and accept the obligant	3113 OI, GEORGI) GOT 10303, FT	UITQQ OM				_	
SIGNATURE	Signature, typed or printed name of registered agent							
		#NO 2008 ™ #DDMCBORD. (PAC-)	E: Magratoriac	Agent signatu	w beniupen en	then reinstating) DATI		
12.	OFFICERS AND	DIRECTORS	13.		re required w	ADDITIONS/CHANGES TO OFFICERS		RS IN 12
12.	OFFICERS AND President & Direct	DIRECTORS DELETE			re benkupen en			RS IN 12
	OFFICERS AND	DIRECTORS DELETE	13.	mLE	re required w		AND DIRECTO	RS IN 12
TILE	OFFICERS AND President & Direct Thomas Lee Johnson	DIRECTORS DELETE	13. 1.1 TI 1.2 N	mLE	7		AND DIRECTO	RS IN 12
NAME STREET ADDRESS	President & Direct Thomas Lee Johnson P. O. Box 14023	ORECTORS OY DELETE	13. 1.1 TI 1.2 N 1.3 S	TLE AME	7		AND DIRECTO	RS IN 12
TITLE NAME STREET ADDRESS CITY-ST-ZP	OFFICERS AND President & Direct Thomas Lee Johnson	ORECTORS OY DELETE	13. 1.1 TI 1.2 N 1.3 S	ITLE AME TREET ADDRES ITY-ST-ZIP	7		AND DIRECTO	
TITLE NAME STREET ADDRESS	President & Direct Thomas Lee Johnson P. O. Box 14023	OT DELETE 1, III 2317-4023	13. 1.1 TI 1.2 N 1.3 S 1.4 C	TILE AME TREET ADDRES TTY- ST-ZIP	7		AND DIRECTO	RS IN 12
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	President & Direct Thomas Lee Johnson P. O. Box 14023 Tallahassee, FL 32	OT DELETE 1, III 2317-4023	13. 1.1 Ti 1.2 N 1.3 S' 1.4 C 2.1 Ti 2.2 N	TILE AME TREET ADDRES TTY- ST-ZIP	55		AND DIRECTO	RS IN 12
TITLE NAME STREET ADDRESS CITY-ST-DP TITLE NAME STREET ADDRESS	President & Direct Thomas Lee Johnson P. O. Box 14023 Tallahassee, FL 32	OT DELETE 1, III 2317-4023	13. 1.1 TI 1.2 N 1.3 S 1.4 C 2.1 TI 2.2 N 2.3 S	TILE AME TREET ADDRES TTY-ST-ZIP TILE AME	55		AND DIRECTO	RS IN 12
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	President & Direct Thomas Lee Johnson P. O. Box 14023 Tallahassee, FL 32	OT DELETE 1, III 2317-4023	13. 1.1 TI 1.2 N 1.3 S 1.4 C 2.1 TI 2.2 N 2.3 S	TILE AME TREET ADDRES TIY-ST-ZIP TILE AME TREET ADDRES TIY-ST-ZIP	55		AND DIRECTO	RS IN 12 Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	President & Direct Thomas Lee Johnson P. O. Box 14023 Tallahassee, FL 32	DIRECTORS OY DELETE 1, III 2317-4023 DELETE	13. 1.1 TI 1.2 N 1.3 S 1.4 C 2.1 TI 2.2 N 2.3 S 2.4 C	TILE AME TREET ADDRES TTY- ST-ZIP TREET ADDRES TREET ADDRES TTY- ST-ZIP TILE	55		AND DIRECTO Change Change	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	President & Direct Thomas Lee Johnson P. O. Box 14023 Tallahassee, FL 32	DIRECTORS OY DELETE 1, III 2317-4023 DELETE	13. 1.1 TI 1.2 N 1.3 S' 1.4 C 2.1 TI 2.2 N 2.3 S' 2.4 C 3.1 TI 3.2 N	TILE AME TREET ADDRES TTY- ST-ZIP TREET ADDRES TREET ADDRES TTY- ST-ZIP TILE	ss		AND DIRECTO Change Change	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	President & Direct Thomas Lee Johnson P. O. Box 14023 Tallahassee, FL 32	DIRECTORS OY DELETE 1, III 2317-4023 DELETE	13. 1.1 TI 12.N 1.3 S' 1.4 C 2.1 TI 2.2 N 2.3 S' 2.4 C 3.1 TI 3.2 N	TILE AME TREET ADDRES TY- ST-ZIP TREET ADDRES TIY- ST-ZIP TILE AME	ss		AND DIRECTO Change Change	- Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	President & Direct Thomas Lee Johnson P. O. Box 14023 Tallahassee, FL 32	DIRECTORS OY DELETE 1, III 2317-4023 DELETE	13. 1.1 TI 12.N 1.3 S' 1.4 C 2.1 TI 2.2 N 2.3 S' 2.4 C 3.1 TI 3.2 N	TILE AME TREET ADDRES TIV- ST-ZIP TILE AME TREET ADDRES TIV- ST-ZIP TILE TREET ADDRES TREET ADDRES TREET ADDRES	ss		AND DIRECTO Change Change	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	President & Direct Thomas Lee Johnson P. O. Box 14023 Tallahassee, FL 32	DIRECTORS OY DELETE 1, III 2317-4023 DELETE	13. 1.1 TI 12 N 1.3 S' 1.4 C 2.1 TI 2.2 N 2.3 S' 2.4 C 3.1 TI 3.2 N 3.3 S' 3.4 C	TILE AME TREET ADDRES TIV- 5T- ZIP TILE AME TREET ADDRES TIV- ST- ZIP TILE TREET ADDRES TREET ADDRES TREET ADDRES TREET ADDRES TREET ADDRES TREET ADDRES	ss		AND DIRECTO Change Change	- Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	President & Direct Thomas Lee Johnson P. O. Box 14023 Tallahassee, FL 32	DIRECTORS OY DELETE 1, III 2317-4023 DELETE	13. 1.171 1.2 N 1.3 S 1.4 C 2.1 T 2.2 N 2.3 S 2.4 C 2.1 T 3.2 N 3.3 S 3.4 C 4.3 T 4.2 N	TILE AME TREET ADDRES TIV- 5T- ZIP TILE AME TREET ADDRES TIV- ST- ZIP TILE TREET ADDRES TREET ADDRES TREET ADDRES TREET ADDRES TREET ADDRES TREET ADDRES	S		AND DIRECTO Change Change	- Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	President & Direct Thomas Lee Johnson P. O. Box 14023 Tallahassee, FL 32	DIRECTORS OY DELETE 1, III 2317-4023 DELETE	13. 1.171 12.N 1.38 1.40 2.171 22.N 2.35 2.40 2.171 32.N 3.38 3.4.0 4.2N 4.35	TILE AME TREET ADDRES TIV: ST-ZIP TILE TREET ADDRES TIV: ST-ZIP TILE TREET ADDRES TREET ADDRES	S		Change Change	- Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	President & Direct Thomas Lee Johnson P. O. Box 14023 Tallahassee, FL 32	DIRECTORS OY DELETE 1, III 2317-4023 DELETE	13. 1.171 12.N 1.38 1.40 2.171 22.N 2.35 2.40 2.171 32.N 3.38 3.4.0 4.2N 4.35	TILE AME TREET ADDRES TIV- 57- ZIP TILE AME TREET ADDRES TIV- 57- ZIP TILE TREET ADDRES TIV- 57- ZIP TILE TIVE TADDRES TIV- 57- ZIP TILE TREET ADDRES TIV- 57- ZIP	S		AND DIRECTO Change Change	- Addition
TITLE NAME STREET ADDRESS CITY-ST-ZEP CITY-ST-ZEP	President & Direct Thomas Lee Johnson P. O. Box 14023 Tallahassee, FL 32	DIRECTORS OY DELETE 317-4023 DELETE	13. 1.171 12.N 1.38 1.4G 2.171 22.N 2.35 2.4G 2.171 32.N 3.38 3.4.G 4.371 4.2N 4.38	TILE AME TREET ADDRES TIV- 57- ZIP TILE AME TREET ADDRES TIV- 57- ZIP TILE TIVE TADDRES TIV- 57- ZIP TILE TREET ADDRES TREET ADDRES TREET ADDRES TREET ADDRES TREET ADDRES TIV- 57- ZIP TILE	S		Change Change	- Addition
TITLE NAME STREET ADDRESS CITY-ST-ZEP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZEP TITLE	President & Direct Thomas Lee Johnson P. O. Box 14023 Tallahassee, FL 32	DIRECTORS OY DELETE 317-4023 DELETE	13. 1.1TI 12.N 1.3S 1.4C 2.1TI 22.N 2.3S 2.4C 2.1TI 32.N 3.3S 3.4.C 4.1TI 4.2N 4.3S 4.4C 5.1TI 5.2.N	TILE AME TREET ADDRES TIV- 57- ZIP TILE AME TREET ADDRES TIV- 57- ZIP TILE TIVE TADDRES TIV- 57- ZIP TILE TREET ADDRES TREET ADDRES TREET ADDRES TREET ADDRES TREET ADDRES TIV- 57- ZIP TILE	\$ \$ \$		Change Change	- Addition
TITLE NAME STREET ADDRESS CITY-ST-ZEP TITLE NAME	President & Direct Thomas Lee Johnson P. O. Box 14023 Tallahassee, FL 32	DIRECTORS OY DELETE 317-4023 DELETE	13. 1.1TI 12.N 1.3S 1.4C 2.1TI 22.N 2.3S 2.4C 2.1TI 32.N 3.3S 34.C 4.3TI 4.2N 4.3S 4.4C 5.1TI 5.2.N 5.3S	TILE AME TREET ADDRES TIV- 57- ZIP TILE AME TREET ADDRES TIV- 57- ZIP TILE TIVE TADDRES TIV- 57- ZIP TILE TREET ADDRES TIV- 57- ZIP TILE TREET ADDRES TIV- 57- ZIP TILE AME	\$ \$ \$		Change Change	- Addition
TITLE NAME STREET ADDRESS CITY-ST-ZEP TITLE NAME STREET ADDRESS	President & Direct Thomas Lee Johnson P. O. Box 14023 Tallahassee, FL 32	DIRECTORS OY DELETE 317-4023 DELETE	13. 1.1TI 12.N 1.3S 1.4C 2.1TI 22.N 2.3S 2.4C 2.1TI 32.N 3.3S 34.C 4.3TI 4.2N 4.3S 4.4C 5.1TI 5.2.N 5.3S	TILE AME TREET ADDRES TIV- 57- ZIP TILE AME TREET ADDRES TIV- 57- ZIP TILE TREET ADDRES TIV- 57- ZIP	\$ \$ \$		Change Change	- Addition
TITLE NAME STREET ADDRESS CITY-ST-ZEP	President & Direct Thomas Lee Johnson P. O. Box 14023 Tallahassee, FL 32	DIRECTORS OY DELETE 317-4023 DELETE	13. 1.1TI 12.N 1.3S 1.4C 2.1TI 22.N 2.3S 2.4C 3.1TI 32.N 3.3S 3.4.C 4.3TI 4.2N 4.3S 4.4C 5.1TI 5.2N 5.3S 5.4C	TILE AME TREET ADDRES TIV- 57- ZIP TILE AME TREET ADDRES TIV- 57- ZIP TILE TIVE TILE TIV- 57- ZIP TILE TIV- 57- ZIP TILE	\$ \$ \$		Change Change Change	Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZEP TITLE	OFFICERS AND President & Direct Thomas Lee Johnson P. O. Box 14023 Tallahassee. FL 32	DIRECTORS OY DELETE 317-4023 DELETE	13. 1.1TI 12.N 1.3S 1.4C 2.1TI 22.N 2.3S 2.4C 2.1TI 32.N 3.4.C 4.3TI 4.2N 4.3S 4.4C 5.1TI 5.2.N 6.1TI 62.N	TILE AME TREET ADDRES TIV. 57-ZIP TILE AME TREET ADDRES TIV. 57-ZIP TILE TIV. 57-ZIP TILE TIV. 57-ZIP TILE	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		Change Change Change	Addition 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.