COND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Jul 09, 1999 8:00 am Secretary of State

07-09-1999 90021 043 \*\*\*150.00

## OCUMENT # P98000032244

SE COMPLITERS INC

ncipal Place of Business	Mailing Address		
3 NW 27 PLACE AL SPRINGS FL 33065	12363 NW 27 PLACE CORAL SPRINGS FL 33065		
Principal Place of Business	2a. Mailing Address		

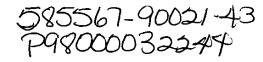
L SPRINGS FL 33065	CORAL SPRINGS FL 33065	DO NOT WRITE IN THIS SPACE		
		3. Date Incorporated or Qualified		
		02/02/1998		
Principal Place of Business	2a. Mailing Address	4. FEI Number Applied For		
	26	65-0827567 Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired S8.75 Additional Fee Required		
City & State	City & State	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip Country	Zip Cour 29 30	8. This corporation owes the current year Intangible Personal Property. Yes No		
9. Name and Addres	s of Current Registered Agent	10. Name and Address of New Registered Agent		
FEDERALL ODEOODY O		81 Name		
12363 NW 27 PLACE		82 Street Address (P.O. Box Number is Not Acceptable)		
CORAL SPRINGS FL 33065		83		
		84 City FL 85 Zip Code		

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.

GNATURE					
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE:		e required when reinstating)	DATE
	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
E	D	DELETÉ	1.1 TITLE		Change Addition
Æ	FEDERMAN, GREGORY S		1.2 NAME		
EET ADDRESS	12363 NW 27 PLACE		1.3 STREET ADDRESS		
∕-ST-ZIP	CORAL SPRINGS FL 33065		1.4 CITY-ST-ZIP		
E	D	DELETE	2.1 TITLE		Change Addition
Æ	FEDERMAN, ANNA R		2.2 NAME		
EET ADDRESS	12363 NW 27 PLACE		2.3 STREET ADDRESS		
Y-ST-ZIP	CORAL SPRINGS FL 33065		2.4 CITY-ST-ZIP		
.E	D	DELETE	3.1 TITLE		Change Addition
Æ	FEDERMAN, JEANETTE M		3.2 NAME		
EET ADDRESS	14750 NW 16 ST.		3.3 STREET ADDRESS		
Y-ST-ZIP	DAVIE FL 33025		3.4 CITY-ST-ZIP -		
.E		DELETE	4,1 TITLE		Change Addition
Æ			4.2 NAME		
EET ADDRESS			4.3 STREET ADDRESS		
Y-ST-ZIP			4.4 CITY-ST-ZIP		
.E		DELETE	5.1 TITLE		Change Addition
4Ε			5.2 NAME		
EET ADDRESS			5.3 STREET ADDRESS		,
Y-ST-ZIP			5.4 CITY-ST-ZIP		
Æ		DELETE	6.1 TITLE		Change Addition
<b>AE</b>			6.2 NAME		
EET ADORESS			6.3 STREET ADDRESS		
Y-ST-ZIP			6.4 CITY-ST-ZIP		<u> </u>

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.

IGNATURE: 0-2



## GSF Computers, Inc. 12363 NW 27 Place Coral Springs, Fl. 33065

(954)757 - 4444

July 6, 1999

Please except this check in the amount of \$150.00 as payment in full. We did not received the first the 1999 Profit Corporation Annual Report Packet.

Thank You,

Gregory S. Federman