PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 09, 1999 8:00 am Secretary of State

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DOCUMENT # P98000087561

EUFAULA COMPUTERS, INC.												
Dringinal Place	of Business		Mail	ing Address				-{ FEMBLIONS (SA JESON 1244) OTHU ODAIN COL	li bulbi ib	ijo ræ en f klijæ	[[]]] ()#1 00	
Principal Place of Business Mailing Address 4413 STE. A CONSTITUTION LN. P.O. BOX 486 MARIANNA FL 32446 MARIANNA FL 32446								DO NOT WRITE IN	I THIS S	SPACE		
								3. Date Incorporated or Qualifed 10/12/1998				
2. Principal Pl	ace of Busine		2a. I	Mailing Address				4, FEI Number		. Apr	plied For	1
21	ACO OI DUSINO	00	— — — — — — — — — — — — — — — — — — —	26				59-353927	2	\	t Applicable	1
Suite, Apt.	#, etc.			Suite, Apl. #, etc.				5. Certificate of Status Desired		\$8.75 A Fee Re		
City & State				City & State				6. Election Campaign Financing		\$5.00	May Be	1
23			28	28				Trust Fund Contribution		Added to		1
Zip		Country		Zip Countr			.,	8. This corporation owes the current year Intangible				.}=
24		5	29		30			Personal Property Tax.			□No	4
	9. Name a	nd Address of Cur	rent Registe	red Agent				10. Name and Address of New Regis	tered A	gent		┨
000	LI IOUN LI				j'	ii Na	me					
ODOM, JOHN H 4413 STE. A CONSTITUTION LN.						32 St	eet Addre	Address (P.O. Box Number is Not Acceptable)]
MAR	ianna FL 3:	2446]	33						
						34 Cii	y Fi as Zip C			ode	1	
44 Ourseast	le the posicie	ne of Soctions 607	0502 and 607	1508 Florida Statut	es the ab	We-nar	ned como	oration submits this statement for the purp		hanging its	registered	1
office or re	egistered ager m familiar with	nt, or both, in the St , and accept the ob	ate of Florida ligations of,	Such change was a Section 607.0505, Flo	uthorized rida Statul	by the o	corporatio	oration submits this statement for the purpoin's board of directors, I hereby accept the	appoint	ment as rec	jistered	
SIGNATURE				- Nove	D			when reinstating) D.	ATE			1_
12.	Signature, typed or printed name of registered agent and OFFICERS AND D					Small drillan	(Ne ledosed	ADDITIONS/CHANGES TO OFFICE		DIRECTO	RS IN 12	18
TITLE	D DELETE					1.1 TITLE				Change	Addition	1 8
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ALIA OVE A GOLIOTTICTOLLIN					1.2 NAX	E	1					
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6.4 CATY-ST-ZEP CITY-ST-ZIP 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 it changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: