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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

## FILED Apr 14, 1999 8:00 am Secretary of State

, r	1999 DIVISION OF CORPORATIONS			04-14-1999 90032 025 ***150.00	
OCU	MENT # P9800	00102	055		
UE C	COPIERS AND COMPUT	TERS, INC.	VALUE	copieds 40	
		Mai	ling Address	<del></del>	
	12. Proce		=		1
DI	XIE HIGHWAY		north dixie highway Lauderdale FL 33305		
Choose of			CAUDENDALL I E 30000		DO NOT WRITE IN THIS SPACE
	į.				3. Date Incorporated or Qualifed 12/04/1998 4. FEI Number Applied For
Principal F	Place of Business	2a.	Mailing Address		26/20/
! i		26			63-088/90/ Not Applicable
Suite, Apt.	. #, etc.	$\vdash$	Suite, Apt. #, etc.		5. Certificate of Status Desired
i	<u> </u>	27			ree Required
City & Sta		28	City & State		6. Election Campaign Financing
Zip	Country	-	Zip C	Country	8. This corporation owes the current year Intangible  Personal Property Tax.
<u>!</u>	25	29		10	Personal Property Tax. Yes No  10. Name and Address of New Registered Agent
	9. Name and Address of	Current Regist	ered Agent	81 Name //	10. Haird Bird Address of How Insglateled Agent
1 494	ALLE, THOMAS L			17	RHERMAN
	5353 NORTH FEDERAL HIGHWAY, SUITE 405				P.O. Roy Number of Motor Stables
					A CONTRACTOR OF THE PARTY OF TH
FUR	LAUDENDALE FL 33308			83 700	TAUCHARDO 71 55308
				84 , rin.	85 Zip Code
					Mr. Harold R. Herman
4-Pursuant	t to the provisions of Sections 6 registered agent, or both, in the	07.0502 and 60 State of Florida	Z-1508 Florida Statutes	horized by	2920 NE 41st st. the purpose of changing its registered Port Laudendal, PL 83808-5755 ccept the appointment as registered
agent. I a	am familiar with, and accept the	obligations of,	Section 607.0505, Flori	da Statutes.	
SIGNATURE	HIR HER	MAN		- <del></del>	7-7-7-
		ered agent and title if	<del></del>	legistered Agent signature require 13,	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
2.	<del></del>	RS AND DIREC	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition
TLE	D THOMAS		A COLOR	1.2 NAME	4
AME	LASALLE, THOMAS L	CUMAY OUR	TT 40E		AC E0034
REET ADDRESS			IE <del>1</del> 03	1.3 STREET ADDRESS	328
TY-ST-ZIP	FORT LAUDERDALE FL 33	3308	□ DELETE	1.4 City-St-ZIP	☐ Change ☐ Addition ☐
TLE	Box PRES.		T) DETE IC	l t	
AME	KR HERM	AN .		2.2 NAME	
REET ADORESS	2133 N. 414	in Mu	3/ 777 - 6	2.3 STREET ADDRESS	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
TY-ST-ZIP	7/ /www.	CARLO FI	7. <u>999</u>	2.4 CITY-ST-ZIP	☐ Change ☐ Addition
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TY-ST-ZIP	<del> </del>		——————————————————————————————————————	3.4. CITY-ST-ZIP	☐ Change ☐ Addition
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AME				4.2 NAME	
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ITY-ST-ZIP	<u> </u>			4.4 CITY-ST-ZIP	
Π1 <b>E</b>					Channa Maddition
			☐ DELETE	5.1 ΠTLE	☐ Change ☐ Addition
IAME			☐ DELETE	5.1 ΠΤLE 5.2 NAME	☐ Change ☐ Addition
	s		☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	☐ Change ☐ Addition
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TREET ADDRES	s		☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE	☐ Change ☐ Addition ☐ Change ☐ Change ☐ Addition ☐ Change ☐ Change ☐ Addition ☐ Change
IAME TREET ADDRESS ITY-ST-ZIP TILE IAME	s			5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 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 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: HALLENGULTUZIONETIEN HAN

1-22-99