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

PROFIT May 11 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # \$71080 (3) WEISCO COMPUTERS, INC. Principal Place of Business Mailing Address 2211 LEE RD. **SUITE 104** SUITE 104 DO NOT WRITE IN THIS SPACE WINTER PARK FL 32789 WINTER PARK FL 32789 3. Date Incorporated or Qualified 08/01/1991 2. Principal Place of Business 2a. Mailing Address Applied For 59-3082314 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5,00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name Weiss, Mitchell H. 2211 LEE RD. 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 104 83 WINTER PARK FL 32789 City Zip Code 11. 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 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE DELETE 1.1 TITLE **Addition** WILLIAM L. CAMPMAN WEISS, MITCHELL H. NAME 1.2 NAME 32560 LAKESHOUS DE. 2211 LEE RD., #104 STREET ADDRESS 1.3 STREET ADDRESS WINTER PARK FL CITY-ST-ZIP 14 CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE NAME WEISS, JOANNE M. 22 NAME 2211 LEE RO., #104 STREET ADDRESS 2 3 STREET ADDRESS WINTER PARK FL CITY-ST-ZIP 2 4 City - St - ZiP DELETE Addition TITLE 3 1 TITLE ☐ Change NAME 32 NAME STREET ADDRESS **3 3 STREET ADDRESS** CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE ☐ Addition Change TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY - ST-ZIP DELETE TITLE Change Addition 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 14. Thereby certify that the information supplied with the 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 autival 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 conviction of the receipt 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 order attagraphic with an address

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