FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 PM 1:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S72767** **(4)**

1. Current Name

WISE MICROCOMPUTER SOLUTIONS INC.

Principal Place of Business

8535-3 BAYMEADOWS ROAD
SUITE 190
JACKSONVILLE FL 32256

Mailing Address

8535-3 BAYMEADOWS ROAD
#190
JACKSONVILLE FL 32256
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **08/06/1991**

3a. Date of Last Report: **08/08/1994**

2. Principal Place of Business — 21

2a. Mailing Address — 26

Suite, Apt. #, etc. — 22 / 27

City & State — 23 / 28

Zip / County — 24 / 25 / 29 / 30

4. FEI Number: **59-3098456** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. *This corporation has liability for intangible tax under S. 199.032, Florida Statutes* ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

WALKER, WILLIAM H
8535-3 BAYMEADOWS ROAD
SUITE 190
JACKSONVILLE FL 32256

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section 607.1008, 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 I accept the obligations of, Section 607.325, Florida Statutes.

SIGNATURE

12. OFFICER AND DIRECTOR	13. ADDITIONS, CHANGES TO OFFICER AND DIRECTOR
PVST WALKER, WILLIAM H 8535-3 BAYMEADOWS RD., STE. 190 JACKSONVILLE FL	☐ Change ☐ Addition
S WALKER, WILLIAM H H. 8535-3 BAYMEADOWS RD., STE. 190 JACKSONVILLE FL	☐ Change ☐ Addition
	☐ Change ☐ Addition
	☐ Change ☐ Addition
	☐ Change ☐ Addition
	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing 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 I am familiar with the provisions of Chapter 607, Florida Statutes, relating to the preparation of this report, including associated penalties.

SIGNATURE: W. H. WALKER — APRIL 30, 1995 — (904) 367-8009

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number

0407870 FP