

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

FILED
Mar 11 1998 8:00am
Secretary of State



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

PROFIT CORPORATION
 ANNUAL REPORT
1998

DOCUMENT # V09769 (3)
 1. Corporation Name
COMPUTEL BUSINESS SYSTEMS, INC.



Principal Place of Business
**5050 SEMINOLE BLVD.
 ST. PETERSBURG FL 33708**

Mailing Address
**5050 SEMINOLE BLVD.
 ST. PETERSBURG FL 33708**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 01/31/1992	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-3101506	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent VOGT, JAMES T. 5050 SEMINOLE BLVD ST PETERSBURG FL 33708				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 Sections 607.0502 and 607.1408, 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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	NAME	DELETED	1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS
P	VOGT, JAMES T. 7882 SIALBOAT KWY BLVD S PASADENA FL	<input checked="" type="checkbox"/>			
VP	RYBERG, ROBERT A. 7968 10TH AVENUE S. ST. PETERSBURG FL	<input type="checkbox"/>	2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS
S	VOGT, FRANCES A. 7882 SIALBOAT KEY BLVD S PASADENA FL	<input checked="" type="checkbox"/>	2.4 CITY-ST-ZIP		
T	RYBERG, ANN R. 7968 10TH AVENUE ST. PETERSBURG FL	<input type="checkbox"/>	3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS
		<input type="checkbox"/>	3.4 CITY-ST-ZIP		
		<input type="checkbox"/>	4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS
		<input type="checkbox"/>	4.4 CITY-ST-ZIP		
		<input type="checkbox"/>	5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS
		<input type="checkbox"/>	5.4 CITY-ST-ZIP		
		<input type="checkbox"/>	6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS
		<input type="checkbox"/>	6.4 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 checked, or on an attachment with an address

SIGNATURE: *Robert A. Ryberg* **ROBERT A. RYBERG** 3/6/98 813 392 1266

CF2E034 (10/97)