## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Jul 10, 2007 08:00 AM ıte

ANNOAL ILLI OILL					<b>C</b> -	í 4
1. Entity Nam	TIVE COMPUTERS AND EC			Se	cretary of Sta	
Principal Plac 9707 NORTH UNIT 216 PLANTATION	H NEW RIVER CANAL ROAD	Meiling Address 9707 NORTH NEW RIVER CAN/ UNIT 216 PLANTATION, FL 33324	al road			
DO NOT WRITE IN THIS SPA			CE	07032007 No Chg-P CR2E034 (11/05)  4. FEI Number		
	6, Name and Address of Current Re	<u> </u>				
BEVILACQUA, RALPH F PRES. 9707 N NEW RIVER CANAL RD UNIT 216 PLANTATION, FL 33324			DO NOT WRITE IN THIS SPACE			
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE						
Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when constaine)  DATE  DATE						
FILE NOW!!! FEE IS \$150.00  9. Election Campaign Finar Due by September 14, 2007  7. Trust Fund Contribution.				5.00 May Be ided to Fees		s. 607.193(2)(b), F.S., the receive the prior notice.
10.	OFFICERS AND O	RECTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PRES BEVILACQUA, RALPH 9707 N. NEW RIVER CANAL RD. # PLANTATION, FL 33324	216		U00000768093 07/10/07-80031-021		68093 0031-021 150.00
STREET ADDRESS City-St-ZIP		<u> </u>				
TITLE NAME STREET ADORESS CITY+ST-ZIP			DO NOT WRITE			
NTLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPA	ACE

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 kustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with alt other like empowered.

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-SY-ZIP

NAME STREET ADDRESS.