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PROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

FILED

Jan 24 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V38140

(2)

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

R.S. COMPUTER SALES, INC. Principal Place of Business Mailing Address 15520 SW 82 AV 1401 S.W. 1 AVENUE MIAMI FL 33130 MIAMI FL 33157-2217 US US 3. Date Incorporated or Qualified 3a. Date of Last Report 05/21/1992 03/04/1996 2a. Mailing Address 4. FEI Number 2. Principal Place of Business Applied For 2760 S.W. BANE 65-0384492 2700 S, W. 3 AVB. Not Applicable Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional П 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees Country 8. This corporation has liability for intangible tax under s. 199.032, 9. Name and Address of Current Registered Agent Florida Statutes Yes No 10. Name and Address of New Registered Agent Name DOWNS, CRAIG T. 300 SEVILLA AVENUE Street Address (P.O. Box Number is Not Acceptable) **B2** SUITE 305 **CORAL GABLES FL 33134** 83 84 City Zip Code 85 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Supported by the experience of the experience agent and title in applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)DELETE Change TILLE 1.1 TITLE SHELLOW, RICHARD 1.2 NAME NAME 15520 S.W. 82 AVENUE 1.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33157** 1.4 CITY-ST-ZIP CITY-S1-ZIP Addition SD DELETÉ Change TITLE 2.1 TITLE SHELLOW, ROBERT NAME **2.2 NAME** 2150 SAN SOUCI BLVD. 2.3 STREET ADDRESS STREET ADDRESS NORTH MIAMI FL 33181 2. 4 CITY - ST - ZIP CITY - ST - ZIP ☐ Change DELETE Addition TITLE 3.1 TITLE SHELLOW, ANNETTE NAME 3.2 NAME 15520 S.W. 82 AVE. STREET ADDRESS 3.3 STREET ADDRESS **MIAMI FL 33157** CITY-ST-ZIP 3.4 CITY-ST-ZIP VICE PRESIDENT- LONTHOllen . Change DELETE TIBLE 4.1 TITLE A.A.W 4. 2 NAME JUANA MA. CASTANEN O 92 40 S.W. 345T. 4.3 STREET ADDRESS MIAMO, FL 33165 4.4 CITY-ST-ZIP CHY-S1-7/9 DELETE 51 TITLE ☐ Change Addition Tible 52 NAME NAME STREET ADORESS 5.3 STREET ADDRESS 54 CHY-ST-ZIP City-St-ZiP DELETE Change Addition TITLE 61 TITLE NAME 62 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP 14. I do 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 Brock 13 if changed on an attachment with an address