

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

FILED

Mar 14 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # V 38140
1. Corporation Name

R.S. COMPUTER SALES, INC.

Principal Place of Business	Mailing Address
2700 SW 3rd AVE MIAMI FL 33129	STE 2F

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

3. Date Incorporated or Qualified	3a. Date of Last Report
5/21/1992	03/4/1996
4. FEI Number	Applied For
65-0384492	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	
DOWNS, CRAIG T. 300 SEVILLA AVE STE. 305 CORAL GABLES, FL 33134	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL 85 Zip Code

10. Name and Address of New Registered Agent	

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. I 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)

DATE

12. OFFICERS AND DIRECTORS		
TITLE	DP	☐ DELETE
NAME	SHELLOW, RICHARD	
STREET ADDRESS	15520 SW 82 AVE	
CITY-STATE-ZIP	MIAMI FL 33157	
TITLE	SD	☐ DELETE
NAME	SHELLOW, ROBERT	
STREET ADDRESS	2150 SANSOUCI BLVD.	
CITY-STATE-ZIP	NORTH MIAMI FL 33181	
TITLE	TD	☐ DELETE
NAME	SHELLOW, ANNETTE	
STREET ADDRESS	15520 SW 82 AVE	
CITY-STATE-ZIP	MIAMI FL 33157	
TITLE	VP	☐ DELETE
NAME	CASTANEDO JUANA M.	
STREET ADDRESS	9290 SW 34 ST	
CITY-STATE-ZIP	MIAMI FL 33165	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE	DP & SD	☒ Change ☐ Addition
1.2 NAME	SHELLOW, RICHARD	
1.3 STREET ADDRESS	2700 SW 3rd AVE STE. 2F	
1.4 CITY-STATE-ZIP	MIAMI FL 33129	
2.1 TITLE	VICE PRESIDENT	☒ Change ☐ Addition
2.2 NAME	SHELLOW, ROBERT	
2.3 STREET ADDRESS	2700 SW 3rd AVE STE. 2 F	
2.4 CITY-STATE-ZIP	MIAMI FL 33129	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-STATE-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-STATE-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME	100002116441	
5.3 STREET ADDRESS	-03/18/97--01077--029	
5.4 CITY-STATE-ZIP	***61.25	
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-STATE-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(a), 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 changed, or on an attachment with an address.

SIGNATURE: *Annelle M. Shellow*

3/19/97

CR2E034 (9/96)