FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1	9	9	6

DOCUMENT #
1. Corporation Name

COMM Principal Place o	ON CENTS COMPUTER C		JLTING, INC.			· · · · · · · · · · · · · · · · · · ·				
		IVI		e ne						
250 N. BANA D-13	ina river or.		250 N. BANANA RIVE D-13	250 N. BANANA RIVER DR. D-13						
MERRITT ISLAND FL 32952 US		MERRITT ISLAND FL 32952 US		3. Date Incorporated or Qualified 3a. Date of Last Report 10/13/1992 04/28/1995						
2. Principal Plac	e of Business	2a.	Maling Address				4. FEI Number			Applied For
21		26					59-3144859			Not Applicable
Suite, Apt. #,	etc	27	Suite, Apt. #, etc.				5. Certificate of Status Desired			5 Additional Required
City & State			City & State				6. Election Campaign Financing	П		00 May Be
23 Zin	Country	28		- T	a a		Trust Fund Contribution			ed to Fees
Ζιρ 24	Country 25	29	Ζιρ	Goun 30	it: y		8. This corporation has liability for Florida Statutes		ax under	s 199.032,
	9. Name and Address of Currer		tered Agent				10. Name and Address of New	Registered	Agent	
					81	Name				
	DWIN H JR			ļ.	82	Street Addre	ess (P.O. Box Number is Not Accepta	ble)		
250 N. E APT D-1	Banana River Dr. 2			-	B:3					
	3 T ISLAND FL 32952								7,-7	Zio Codi
777 <u>4</u> 27 W W T	,			'	84	City		FL	. 85	Zıp Code
or registered familiar with SIGNATURE.	the provisions of sections our vision of dagent, or both, in the State of Flori, and accept the obligations of, Sections of the provision of t	da. Suct ion 607.	richange was authoriz 0505, Florida Statutes	ea by the ac i.) pe	icaned corponioration's boar	ation submits this statement for the pud of directors. I hereby accept the app	pointment as	anging its registere	agent. I am
12.	OFFICERS AN			1 3.			ADDITIONS/CHANGES TO OF		DIRECT	ORS IN 12
TITLE	D		DELETE	† 1 Ti	LF.			1	Change	: 🔲 Addition
NAME	HALL, EDWIN H. JR.			1.2 NAM	VC.					
STREET ADDRESS	250 N. BANANA RIVER DR.					ADDRESS				
DITY-ST-ZIP TITLE	MERRITT ISLAND FL 32952		DELETE	14 CIT 2 * TIT		31 - ZiP			Change	Addition
NAME			_,	2.2 NA						
STREET ADDRESS				2.3.STF	HE 27	ADDRESS				
C:TY-ST-Z:P			ED 66.12	2.4 CII		S1 7/2				
TIFLE			DECETE	3 1 M 3 2 NA					Change	e 🔲 Addition
NAME STREET ADORESS						1 ADDRESS				
CITY - ST - ZIP				3 4 CiT						
TITLE			DELETE	4 1 TIT					Change	Addition
NAME				4.2 NAI						
STREET ADDRESS				1		LADDRESS				
TITLE			DELETE	4 4 Cif 5 1 Til		51-217			Change	e Addition
NAMÉ				5.2 NAI	V#					
STREET ADDRESS				5.3 STB	(t ∰	LADORESS				
CITY-ST-ZIP			LJ bereit	5 4 CIT		ST ZIP		w	Chane	Addison
TITLE			DELETE	6 1 TH 6 2 NAI					Change	e Addition
STREET ADDRESS						I ADORESS				
CITY - ST - ZIP				6 4 CIT						
14. I do hereby certify that to oath; that I	the information indicated on this anni	ual repor ivalion o	rt or supplemental ann rithe receiver or truste	iual report is la empowere	iru	ue and accura	or the exemption stated in Section 119 Te and that my signature shall have the sireport as required by Chapter 607, f	e same lega Iorida Statu	l effect as tes; and t	if made under that my name
SIGNAT	JRE: SIGNATURE AND TYPED O	// R PRINTED	NAME OF SIGNING OFFICE	- ER OR DIRECTI	640		3/27/96	407	45 2 la <i>jtinie</i> Phor	- 2025