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Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90207 027 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000025700

1. Corporation Name
CUSTOM COMPUTER SOLUTIONS INC.



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/18/1998

4. FEI Number

59-3504933

Applied For
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 owes the current year Intangible
Personal Property Tax.

Yes No

2. Principal Place of Business

21 2425 N Courtney Pkwy

Suite, Apt. #, etc.

22 6

23 Merritt Island FL

Zip Country

24 32953

2a. Mailing Address

26 2425 N Courtney Pkwy

Suite, Apt. #, etc.

27 6

28 Merritt Island FL

Zip Country

29 32953

30

9. Name and Address of Current Registered Agent

ROCHE, CHRISTOPHER G
215 NORTHGROVE DRIVE
MERRITT ISLAND FL 32953-7957

10. Name and Address of New Registered Agent

81 Name Jason Peterson

82 Street Address (P.O. Box Number is Not Acceptable)
3061 Sea Gate Cir

83

84 City Merritt Island

FL

85 Zip Code 32953

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 *Jason Peterson* Treasurer

Signature, type or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/26/99 DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME ROCHE, CHRISTOPHER G
STREET ADDRESS 215 NORTHGROVE DRIVE
CITY-ST-ZIP MERRITT ISLAND FL 32953-7957

TITLE D
NAME Raymond Galloway
STREET ADDRESS 6057 Cardiff Ave
CITY-ST-ZIP Port St John, FL 32927

TITLE D
NAME Kevin Bradley, SR
STREET ADDRESS 1004 George Ave
CITY-ST-ZIP Rockledge, FL 32955

TITLE D
NAME Jason Peterson
STREET ADDRESS 3061 Sea Gate Cir
CITY-ST-ZIP Merritt Island FL 32953

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D
1.2 NAME Raymond Galloway
1.3 STREET ADDRESS 6057 Cardiff Ave
1.4 CITY-ST-ZIP Port St John FL 32927

2.1 TITLE D
2.2 NAME Kevin Bradley, SR
2.3 STREET ADDRESS 1004 George Ave
2.4 CITY-ST-ZIP Rockledge FL 32955

3.1 TITLE D
3.2 NAME Jason Peterson
3.3 STREET ADDRESS 3061 Sea Gate Cir
3.4 CITY-ST-ZIP Merritt Island FL 32953

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jason Peterson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/99

407 452-8200
Daytime Phone #

CR2E034 (11/98)