

# 2000 UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT # P95000043294**

1. Entity Name

**GRAPHIC SYSTEMS INTERNATIONAL, INC.**

**FILED**  
**Feb 16, 2000 8:00 am**  
**Secretary of State**

02-16-2000 90009 033 \*\*\*158.75

Principal Place of Business

Mailing Address

~~7374 NW 35 TERRACE~~  
 MIAMI FL 33122  
 US

~~7374 NW 35TH TERRACE~~  
 MIAMI FL 33122-1025  
 US

2. Principal Place of Business

**3331 NW 82 AVE**

3. Mailing Address

**3331 NW 82 AVE**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**65-0593370**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**NURY C. RUIZCALDERON**  
**7374 NW 35TH TERRACE**  
**MIAMI FL 33122**

Name

Street Address (P.O. Box Number is Not Acceptable)

**3331 NW 82 AVE**

City

**FL**

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  Delete  
 NAME **D RUIZCALDERON, NURY C**  
 STREET ADDRESS **514 SOUTHWEST 98TH PLACE**  
 CITY-ST-ZIP **MIAMI FL 33174**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME **D ACEVEDO, GERMAN**  
 STREET ADDRESS **657 WOODGATE CIRCLE**  
 CITY-ST-ZIP **SUNRISE FL 33326**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME **D TOLEDO, JESUS R**  
 STREET ADDRESS **8741 SW-126 TERRACE**  
 CITY-ST-ZIP **MIAMI FL 33176**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

13. I hereby certify that the information supplied in 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 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 trustee appointed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: *[Signature]* **Nury C. Ruizcalderon** 1/24/2000 305-477-9998  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)