

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****Mar 31, 2000 08:00 AM****Secretary of State****DOCUMENT # P99000075648**

1. Entity Name

ORANGE COMPUTER, INC.

Principal Place of Business

6157 NW 167 ST #F-021

MIAMI
33015

FL

Mailing Address

6157 NW 167 ST #F-021

MIAMI
33015

FL

2. Principal Place of Business

6157 NW 167 ST #F-21

3. Mailing Address

6157 NW 167 ST #F-21

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

MIAMI

FL

City & State

MIAMI

FL

4. FEI Number

☒ Applied For
☐ Not ApplicableZip
33015

Country

Zip
33015

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

MONTEJO ANDRES

6157 NW 167 ST #F-021

MIAMI
33015

FL

Name

MONTEJO ANDRES

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

6157 NW 167 ST #F-21

City
MIAMI

FL

Zip Code
33015

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)

03/31/2000

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 State10. 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	D	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	D	NAME	STREET ADDRESS	CITY-ST-ZIP
	<input type="checkbox"/> Delete	MONTEJO ANDRES	6157 NW 167 ST #F-021	MIAMI FL 33015		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	MONTEJO ANDRES	6157 NW 167 ST #F-21	MIAMI FL 33015
	<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition			
	<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition			
	<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition			
	<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition			
	<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition			
	<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition			

13. 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 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 empowered 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: andres montejo

P

03/31/2000