

FEB-07-2003 14:55

MWE

FILED
May 13, 2003 8:00 am
Secretary of State

05-13-2003 90051 013 ***150.00

**2003 FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # 420216

1. Entity Name
OFFICE SYSTEMS OF FLORIDA, INC.

90133688

Principal Place of Business
10800 NW 103RD ST
SUITE 1
MIAMI, FL 33178Mailing Address
C/O ROBERT OVENSTEIN
300 E. RIVER DR
EAST HARTFORD, CT 06108

2. Principal Place of Business

3. Mailing Address

State, Apt. #, etc.

State, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1441275

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

Fee Per Line

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYES STREET
TALLAHASSEE, FL 32301

Name

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

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature of Registered Agent (must be signed by the agent)

Signature of Registered Agent (must be signed by the agent)

DATE

9. Election Campaign Financing
Total Cash Contribution\$5.00 May Be
Amount in Cash

10. OFFICERS AND DIRECTORS

TITLE	C	NAME	GRIEDORN, DONALD	STREET ADDRESS	300 EAST RIVER DR	CITY-ST-ZIP	EAST HARTFORD, CT 06108	☐ Delete
TITLE	S	NAME	MURGIO, PETER	STREET ADDRESS	300 EAST RIVER DR	CITY-ST-ZIP	EAST HARTFORD, CT 06108	☐ Delete
TITLE	T	NAME	OVENSTEIN, ROBERT	STREET ADDRESS	300 EAST RIVER DR	CITY-ST-ZIP	EAST HARTFORD, CT 06108	☐ Delete
TITLE	P	NAME	WILLIAMS, CHARLES	STREET ADDRESS	10800 NW 103RD ST.	CITY-ST-ZIP	MIAMI, FL 33178	☐ Delete
TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		☐ Delete
TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		☐ Change ☐ Addition
TITLE		NAME	Robert Orenstein	STREET ADDRESS		CITY-ST-ZIP		☐ Change ☐ Addition
TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		☐ Change ☐ Addition
TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		☐ Change ☐ Addition
TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 199.07(3)(b), 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 007, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert Orenstein

4/30/03

860-291-5676

SIGNATURE AND TYPED OR PRINTED NAME OF AGENT OR PERSON ON BEHALF OF

Business Phone

ATTACHMENT
PO00000-53144 90133688

To whom it May Concern:

I have not recieved any
information regreting the uniform
business report. so I called an
employee in which the number
was provided, the male that I
spoke with told me to download
it onto the computer and print it,
and I did just that, but he also
informed me, ~~that~~ I would be paying
no fee's! Please make sure that
is done. Thank you for your time
and cooperation!