


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2005 08:00 AM
Secretary of State

DOCUMENT # 446909 1. Entity Name MIAMI COMPUTER SYSTEMS, INC.	
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Principal Place of Business 1519 ROBBIA AVENUE CORAL GABLES, FL 33146	Mailing Address 1519 ROBBIA AVENUE CORAL GABLES, FL 33146
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DO NOT WRITE IN THIS SPACE



01032005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1566001	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CARVAJAL, PEDRO J.
1519 ROBBIA AVE.
CORAL GABLES, FL 33146

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD CARVAJAL, PEDRO J. 1519 ROBBIA AVENUE CORAL GABLES, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD CARVAJAL, PEDRO III 1519 ROBBIA AVE. CORAL GABLES, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST CARVAJAL, MARTA C. 1519 ROBBIA AVE. CORAL GABLES, FL
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Pedro J. Carvajal President 01/04/2005 (305) 661-6656

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #