

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 665027

FILED
Jan 17, 2009
Secretary of State

Entity Name: AUTOMATED COMPUTER SYSTEMS, INC.

Current Principal Place of Business:

2010 NW 94 AVE
MIAMI, FL 33172

New Principal Place of Business:

Current Mailing Address:

2010 NW 94 AVE
MIAMI, FL 33172

New Mailing Address:

FEI Number: 59-1988240

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEWIS, RICHARD
TWO DATRN CENTER, SUITE 1209
9130 SOUTH DADELAND BLVD
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LEWIS, DONALD,
Address: 2010 NW 94 AVE
City-St-Zip: MIAMI, FL 00000,

Title: SD () Delete
Name: LEWIS, BRENDA,
Address: 2010 NW 94 AVE
City-St-Zip: MIAMI, FL 00000,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LEWIS, DONALD,
Address: 2010 NW 94 AVE
City-St-Zip: MIAMI, FL 33172 US

Title: SD (X) Change () Addition
Name: LEWIS, BRENDA,
Address: 2010 NW 94 AVE
City-St-Zip: MIAMI, FL 33172 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRENDA F LEWIS

SD

01/17/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date