

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

**FILED**  
**Jul 21, 2003 8:00 am**  
**Secretary of State**

07-21-2003 90123 031 \*\*\*150.00

0092428 AV

**DOCUMENT # F00000001642**

1. Entity Name  
**CODA SYSTEMFORMS (USA), INC.**



Principal Place of Business  
**18540 OCEAN MIST DR  
BOCA RATON FL 33498**

Mailing Address  
**18540 OCEAN MIST DR  
BOCA RATON FL 33498**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **58-1904562**

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**LEE, MELISSA  
18540 OCEAN MIST DR  
BOCA RATON FL 33498**

7. Name and Address of New Registered Agent

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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P  
LEE, JOHN C  
18540 OCEAN MIST DR  
BOCA RATON FL 33498** ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**S  
COOK, NEIL R  
52-54 BEULAH RD  
WALTHAMSTOW LONDON E179L-Q** ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**T  
LEE, MELISSA S  
18540 OCEAN MIST DR  
BOCA RATON FL 33498** ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

6/20/03

(561) 983-2121

CR2E034 (4/03)

Attachment

90144988

F00000001642



**Coda  
Systemforms**  
(U.S.A), Inc.

**18540 Ocean Mist Drive  
Boca Raton, FL 33498  
Toll Free (800) 622-2794  
Tel: (561) 483-2121  
Fax: (561) 483-2232  
Email: jcleee@adelphia.net**

June 30, 2003

Florida Department of State  
Uniform Business Report  
P.O. Box 1500  
Tallahassee, FL 32302-1500

To Whom It May Concern:

The completed and signed Uniform Business Report is enclosed with a check for \$150.00. This was the first return that we received this year (2003). In prior year's we have received the return in a timely manner (prior to May 1<sup>st</sup>) and I have filed timely as well. We have been having difficulty with our mail service in the last several months in which deposits and orders had not been received at our office.

I am requesting that the Department of State waive the \$400 late fee for the above state reason. I will anticipate next year's return and if not received timely, I will proactively contact you so that I may file by the due date. Your favorable consideration would be greatly appreciated.

Sincerely,

  
Melissa Lee  
Coda Systemforms

Enclosure

The first several months in which deposits and orders had not been received at  
place (the return was mailed). We have been having difficulty with our mail service in  
last, we have received the return in a timely manner (prior to May 1<sup>st</sup>) and I  
\$150.00. This was the first return that we received this year (2003). In prior  
the completed and signed Uniform Business Report is enclosed with a check for

Enclosure

June 30, 2003