

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F19936

1. Entity Name
POLISYSTEMS INTERNATIONAL, INC.

FILED
Apr 26, 2001 8:00 am
Secretary of State
04-26-2001 90330 010 ***158.75

Principal Place of Business Mailing Address
12215 SW 129 COURT 15850 SW 106 TERRACE
MIAMI FL 33186 MIAMI FL 33186
US US

2. Principal Place of Business 3. Mailing Address
7324 SW 48 STREET Suite, Apt. #, etc.
Suite, Apt. #, etc.

City & State City & State
MIAMI FL

Zip Country Zip Country
33155

4. FEI Number 59-2080718 Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

NEWMAN, DAVID E., P.A.
5975 SUNSET DR
SUITE 301
SOUTH MIAMI FL 33143

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.

SIGNATURE *Jose V. UGARTE* I, *Jose V. UGARTE* PRESIDENT DATE 4-19-2001
(NOTE: Registered Agent signature required when reinstating)

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, 2001 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE PTS
NAME UGARTE, JOSE VINCENTE ☐ Delete
STREET ADDRESS 15850 SW 106 TERRACE
CITY-ST-ZIP MIAMI FL

TITLE D
NAME UGARTE, JOSE VINCENTE ☐ Delete
STREET ADDRESS 15850 SW 106 TERRACE
CITY-ST-ZIP MIAMI FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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: *Jose V. UGARTE* PRESIDENT DATE 4-19-2001 305-251-9148
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (10/00)