## 2005 FOR PROFIT CORPORATION

SIGNATUR

## FILED **ANNUAL REPORT** May 02, 2005 08:00 AM **DOCUMENT # F19936 Secretary of State** POLISYSTEMS INTERNATIONAL, INC. Mailing Address Principal Place of Business 15850 SW 106 TERRACE 7324 SW 48 STREET MIAMI, FL 33186 MIAMI, FL 33155 US 04282005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2080718 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required THE RESERVE OF THE RESERVE 6. Name and Address of Current Registered Agent NEWMAN, DAVID E., P.A. DO NOT WRITE 5975 SUNSET DR **SUITE 301** IN THIS SPACE SOUTH MIAMI, FL 33143 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) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. OFFICERS AND DIRECTORS 10. PTS TITLE UGARTE, JOSE VINCENTE MARKE 15850 SW 106 TERRACE STREET ADDRESS CITY-ST-ZIP MIAMI, FL U00000352226 05/03/05-80013-009 150.00 D TITLE NAME UGARTE, JOSE VINCENTE STREET ADDRESS 15850 SW 106 TERRACE MIAMI, FL CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE C/(Y-5!-2/P IN THIS SPACE TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-7/P 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 nurses 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 addresse, with appointed like empowered.

ATED NAME OF SIGNING OFFICER OR DIRECTOR

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