

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F95000003168

1. Entity Name  
S & G COMPUTERS, INC.

**FILED**  
**Apr 19, 2001 8:00 am**  
**Secretary of State**

04-19-2001 90067 026 \*\*\*150.00

Principal Place of Business

Mailing Address

PO BOX 8425  
SEMINOLE FL 34645

PO BOX 8425  
SEMINOLE FL 34645

00038975



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 22-3089275

Applied For  
Not Applicable

Zip 33775

Country

Zip 33775

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

D'SOUZA, SHAMA  
5690 ROOSEVELT BLVD  
CLEARWATER FL 34620

Name  
Street Address (P.O. Box Number is Not Acceptable)  
438 62nd Ave N.

City St. Petersburg FL Zip Code 33702

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: *[Signature]*  
Signature, type or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE: 4/11/01

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P  
NAME D'SOUZA, GERARD  
STREET ADDRESS 5690 ROOSEVELT BLVD  
CITY-ST-ZIP CLEARWATER FL 34620 ☐ Delete

TITLE  
NAME  
STREET ADDRESS 438 62nd Ave. N.  
CITY-ST-ZIP St. Petersburg, FL 33702 ☒ Change ☐ Addition

TITLE V  
NAME D'SOUZA, SHAMA  
STREET ADDRESS 5690 ROOSEVELT BLVD  
CITY-ST-ZIP CLEARWATER FL 34620 ☐ Delete

TITLE  
NAME  
STREET ADDRESS 438 62nd Ave N.  
CITY-ST-ZIP St. Petersburg, FL 33702 ☒ 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  
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CITY-ST-ZIP ☐ Delete

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

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

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: *[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/11/01 (727) 343-5082  
Date Daytime Phone #

CR2E034 (10/00)