

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000002525

1. Entity Name

OUTSOURCED AUTOMATED SERVICES AND INTEGRATED SOL

FILED
Mar 10, 2000 8:00 am
Secretary of State

03-10-2000 90037 048 ***158.75

Principal Place of Business

Mailing Address

1221 BRICKELL AVE., STE. 1780
MIAMI FL 33131-3259

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MIAMI FL 33131-3259

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0662877

Applied For

Not Applicable

Zip

Country

Zip

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 *Address*

BEVANS, RONALD T JR.
9300 N.W. 36TH ST.
MIAMI FL 33178

Name

Bevans, Ronald T. Jr.

Street Address (P.O. Box Number is Not Acceptable)

1221 Brickell Avenue

Suite 1780

City

Miami, FL

FL

Zip Code 33131-3259

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

Ronald T. Bevans, Jr.

Ronald T. Bevans, Jr.

03/06/2000

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

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, 2000 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 DCEO ☐ Delete
NAME SICILIAN, JOHN J
STREET ADDRESS 9300 NW 36TH ST.
CITY-ST-ZIP MIAMI FL 33178

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 1221 Brickell Avenue, Suite 1780
CITY-ST-ZIP Miami, FL 33131-3259

TITLE P ☐ Delete
NAME JONES, J. MICHAEL
STREET ADDRESS 9300 N.W. 36TH ST.
CITY-ST-ZIP MIAMI FL 33178

TITLE ☒ Change ☐ Addition
NAME DP
STREET ADDRESS 1221 Brickell Avenue, Suite 1780
CITY-ST-ZIP Miami, FL 33131-3259

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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:

J. Michael Jones

J. Michael Jones

03/06/00 (305) 536-0112

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)