2001 UNIFORM BUSINESS REPORT (UBR)

Feb 01, 2001 8:00 am DOCUMENT # **G99299 Secretary of State** SYSTEMATIC COMPUTER PRODUCTS, INC. 02-01-2001 90183 029 ***150.00 Principal Place of Business Mailing Address 13306 SW 128 STREET 13306 SW 128 STREET MIAMI FL 33186 MIAMI FL 33186 U0012722 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-2375117 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent -SANTIAGO, FERNANDO L. ... Street Address (P.O. Box Number is Not Acceptable) 12935 SW 116TH ST. MIAMI FL 33186 City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. TITLE ☐ Defete Change NAME SANTIAGO, FERNANDO L. NAME STREET ADDRESS STREET ADDRESS 12935 S.W. 116TH STREET CITY-ST-ZIP CITY-ST-ZIP MIAMI FL TITLE ☐ Delete TITLE ☐ Addition NAME SANTIAGO, MARLING STREET ADDRESS STREET ADDRESS 12935 S.W. 116TH STREET CITY-ST-ZIP CITY-ST-ZIP MIAMI FL TITLE ☐ Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP. - 📭 ☐ Addition TITLE ☐ Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE ☐ Delete Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS 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: Fernando funtiago Fernando Santiago signature and typed or printed name of signing officer or director

1/25/01

305-252-2198

Daytime Phone #