## 2003 FOR PROFIT CORPORATION

## UNIFORM BUSINESS REPORT (UBR) **DOCUMENT #** H42170 1. Entity Name COMPUTER FINANCIAL SERVICES, INC.



## **FILED** Feb 17, 2003 8:00 am Secretary of State

02-17-2003 90278 041 \*\*\*150.00

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Principal Place of Business 1412 INDIAN RD WEST PALM BEACH FL 33406 US		Mailing Address 1412 INDIAN ROAD WEST PALM BEACH FL 33406 US			)   1887814 8/11 81914 11831 11831	Z <b>ad</b> if <b>ad</b> ir <b>d</b> idiri ara	lii didii din	ili <b>Ria</b> fi Alan) (aar
2. Principal Place of	Business	3. Mailing Address		·				
Suite, Apt. #, etc.		Suite, Apt. #, etc.						
City & State		City & State			4. FEI Number	<del></del>		
Zip Country		Zip Country			59-249073			Applied For Not Applicabl
6 1			Country	ĺ	5. Certificate of Status Desired		<b>8.75</b> A	dditional
0. N	ame and Address of Current	Registered Agent			7. Name and Address of New	Registered A	gent	
SHAPIRO SIDNEY	r c		Name					
1412 INDIAN RD		Street Addres		Address (P.	(P.O. Box Number is Not Acceptable)			
WEST PALM BEA	CH EL: 00400		.	<del></del>				
WEST FALM DEA	UN PL 33406	•			- "			
	:		City		<del></del>		Zin Co	
8: The above named of the obligations of re	entity submits this statement for	r the purpose of changin	g its registered office or	r registered	d agent, or both, in the State of Fi	FL	Zip Co	
*	gistered agent.				o variation of the	ionoa. Tainiai	ıllıdı wili	i, and accept
SIGNATURE								
V2	yped or printed name of registered agent a	and title if applicable.	(NOTE: Registered Agent signati	ure required wh	nen reinstating)	DATE		
	W!!! FEE IS \$150.00							
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of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes. Truther certify that the information 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 10 or Block 11 if

SIGNATURE AND TYPEDOR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE:

11/03