

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 10, 2002 8:00 am
Secretary of State

04-10-2002 90026 042 ***150.00

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DOCUMENT # K56603

1. Entity Name
CPU SOLUTIONS, INC.

Principal Place of Business
% WALTER R. IRELAND
390 PINELLAS BAYWAY, UNIT G
TIERRA VERDE FL 33715-1914

Mailing Address
% WALTER R. IRELAND
390 PINELLAS BAYWAY, UNIT G
TIERRA VERDE FL 33715-1914



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
4811 DARTMOUTH AVE N

3. Mailing Address
4811 DARTMOUTH AVE N

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
ST PETERSBURG FL

City & State
ST PETERSBURG FL

4. FEI Number
59-2929371

Applied For
 Not Applicable

Zip
33713

Country
USA

Zip
33713

Country
USA

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

IRELAND, WALTER R.
390 PINELLAS BAYWAY
UNIT G
TIERRA VERDE FL 33715-1914

Name

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

City

FL

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)

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, 2002 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
PD
 NAME
IRELAND, WALTER R.
 STREET ADDRESS
390 PINELLAS BAYWAY, #G
 CITY-ST-ZIP
TIERRA VERDE FL

TITLE
PD
 NAME
IRELAND, WALTER R.
 STREET ADDRESS
4811 DARTMOUTH AVE N
 CITY-ST-ZIP
ST PETERSBURG FL 33713

TITLE
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 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:

WALTER R. IRELAND

4/2/02

727 480 9746

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)