2007 UNIFORM BUSINESS REPORT (UBR) FILED Apr 30, 2001 8:00 am Secretary of State **DOCUMENT # M37925** 1. Entity Name ALL BUSINESS COMPUTER SUPPLY INC. 04-30-2001 90454 019 ***150.00 Principal Place of Business Mailing Address 10601 SW 113TH ST 10601 SW 113TH ST MIAMI FL 33176 MIAM! FL 33176 CUU55763 HS 2. Principal Place of Business 3. Mailing Address 4590 NE SansprobleTro 4590 NE Sandrebble Trace Suite, Apt. #, etc. Suite, Apt. #. etc. DO NOT WRITE IN THIS SPACE #3<u>61</u> #30 \ City & State City & State 4. FEI Number Applied For 59-2715925 Stuart Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 24996 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Benestin, Martin BERNSTEIN, MARTIN Street Address (P.O. Box Number is Not Acceptable) 10601 SW 113TH ST MIAMI FL 33176 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 (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. (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE TITLE ☐ Delete Bernstein Shert 4500 12 & Sandpelble Trace #301 Stuart F1 34996 NAME BERNSTEIN, SHERYL NAME STREET ADDRESS 10601 SW 113 ST STREET ADDRESS CITY-ST-7iP MIAMI FL DPS TITLE TITLE ☐ Change ☐ Addition Delete Bernstein, martin (Buddy 4590 n E Sandpubble Trace #301 NAME BERNSTEIN, MARTIN (BUDDY NAME STREET ADDRESS 10601 SW 113TH ST STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL Stua-t F1 34996 TITLS ☐ Delete TITLE Addition Benustein mantia USQONE Sandpebble Trace #301 NAME BERNSTEIN, MARTIN STREET ADDRESS 10601 SW 113 ST STREET ADDRESS Stuart, FI 349a6 CCTY+ST-ZIP CITY-ST-ZIP MIAMI FL TITLE Delete TITLE

TITLE Delete TITLE Addition. NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZiP CITY-ST-7IP 13. Thereby 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

NAME

Title F

NAME.

Delete

STREET ADDRESS

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changed, or on an attachment with an address, with all other like empowered Shery L Benustiin SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Change

☐ Change

Addition

Addition