2001 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 23, 2001 8:00 am Secretary of State **DOCUMENT # M60142** 1. Entity Name DIGITAL COMPUTER SYSTEMS, INC. 04-23-2001 90219 007 ***150.00 Principal Place of Business Mailing Address 2040 SW 78 TERR 12040 SW 78 TERR MIAMI FL 33183 MIAMI FL 33183 2. Principal Place of Business 3. Mailing Address 1054 SW 1054 SW 143 cT Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0061292 MiAMI Not Applicable miAmi Country \$8.75 Additional 5. Certificate of Status Desired 33184 USA USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CHIRINO, JOSE Street Address (P.O. Box Number is Not Acceptable) 12040 SW 78TH TERR **MIAMI FL 33183** 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. CR2E034 (10/00) TITLE ☐ Delete CHIRINO, JOSE A. NAME NAME STREET ADDRESS 12040 SW 78 TERR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL TITLE ☐ Delete TITLE NAME CHIRINO, MAILIN C. NAME STREET ADDRESS STREET ADDRESS 12040 SW 78 TERR CITY-ST-ZIP MIAMI FL CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change TITLE ☐ Delete Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

SIGNATURE:

changed, or on an attachment with an address, with all other like empowered.