2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with ar

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED Apr 28, 2000 8:00 am Secretary of State DOCUMENT # M60295 1. Entity Name SYSNET TECHNOLOGIES, INCORPORATED 04-28-2000 90090 018 ***150.00 Principal Place of Business Mailing Address 10362 SW 144TH ST 10362 SW 144TH ST MIAMI FL 33176-7046 MIAMI FL 33176 AUU49314 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 65-0008256 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CAMPBELL, RICHARD L. DR. Street Address (P.O. Box Number is Not Acceptable) 10362 SW 144TH ST MIAMI FL 33176 City Zio 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 DATE 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 \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Added to Fees Trust Fund Contribution. (See criteria on back) . , , , Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. ☐ Addition ☐ Change TITLE ☐ Delete TITLE CAMPBELL, RICHARD L. NAME NAME STREET ADDRESS STREET ADDRESS 10362 SW 144TH ST. CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ☐ Change ☐ Addition ☐ Delete TITLE TITLE CAMPBELL, VANESSA NAME NAME STREET ADDRESS STREET ADDRESS 10362 SW 144TH ST. CITY-ST-ZIP CITY-ST-ZIP MIAMI FL Direction Addition 2 Delete Change Keller J. Campbell 10362 SW144 MJF JAMES G CAMPBELL, SR NAME NAME STREET ADDRESS 5110 NW 24TH TERRACE STREET ADDRESS Miam! FL 33176-7046 CITY-ST-ZIP City-ST-ZIP GAINESVILLE FL ☐ Delete TITLE Change Addition TITLE CAMPBELL, JR., JAMES NAME NAME STREET ADDRESS STREET ADDRESS 3531 N.W. 41ST TERRACE CITY-ST-ZIP CITY-ST-ZIF **GAINESVILLE FL** D- 114 1 3 ☐ Change ☐ Addition TITLE ☐ Delete TITLE **ERROL CAMPBELL** NAME NAME STREET ADDRESS STREET ADDRESS 5110 NW 24TH TERRACE CITY-ST-7IP CITY-ST-7IP GAINESVILLE FL ☐ Change ☐ Addition ☐ Delete TITLE 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