2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000007264

1. Entity Name

FILED May 14, 2001 8:00 am Secretary of State

Micro 1	Manageme	ent Systems, I	nc.					U	 5-14- 20	JUI 90)] /9 ()23 ****	*15C).00
Principat Plac														
3560 Tl Jackson		, Sout		A0065478										
•	Place of Busin		3. Mailing Address				2. Sept. 1							
Suite, Apt #106	unbeam F t. #, etc.	roau	12847 Swamp Owl. Lane Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE							
City & Sta	nville,	FL ·	City & State Jacksonville, FL				4. FEI Number 59-3627121					F	Applied For Not Applicable	
Zip 3225.7		Country USA	Zip _32258-2180	Country USA				ate of State			<u> </u>	\$8.75 Fee Rec		
Name and Address of Current Registered Agent							7. Name a	ind Addre	ss of Nev	v Regis	stered	Agent		
-1 3		-			Name									
Charles P. Milford, Jr. 3511 Trident Court						ddress (P.C	D. Box Nur	nber is No	Accepta	ible)				
Jacksonville Beach, FL 32250										•				
					City					FL	Zip Code			
8. The above	e named entity	submits this statement fo	r the purpose of changing its	register	ed office o	registered	l agent, or	both, in the	e State of	Florida	ı.			
•														
SIGNATURE	Signature, lyped o	or printed name of registered agent a	and title if applicable. (NOTI	E Hegistore	d Agent signat	nte required wh	en reinstating)				DATE			
189	1		Market Service	u ree	IC 6450	00 000000	,/3							-
Tax filing		ble to satisfy its Intangible nd elects to do so.	After MAY 1, 20	After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of Sta			10.	Election C Trust Fund			ing [) May Be to Fees
11.		OFFICERS AND	DIRECTORS	12.			ADDITION	42/CHVIV	3ES 10 O	HICLE	(S ANL	DIREC	TORS	JH 11
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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:

Thomas J. Sadler, Jr. 4/26/01 (904) 268-5388

SIGNATURE:

Le AThomas J. Sadler, Jr.