

2001 UNIFORM BUSINESS REPORT (UBR)

1/19/01-9¹

FILED
Mar 20, 2001 8:00 am
Secretary of State

01-19-2001 90069 042 ***150.00

DOCUMENT # P00000007657

1. Entity Name

REM COMPUTERS, INC.

Principal Place of Business

Mailing Address

26200 S.W. 131 CT.
HOMESTEAD FL 33032

26200 S.W. 131 CT.
HOMESTEAD FL 33032

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1016993

Applied For

Not Applicable

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

BURTH, EARL
26200 S.W. 131 CT.
HOMESTEAD FL 33032

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 fee if applicable.

(NOTE: Registered Agent signature required when renewing)

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, 2001 Fee will be \$350.00
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

TITLE	Vice-President	☐ Delete
NAME	marcelo Defreitas	
STREET ADDRESS	14874 S.W. 304 Ter	
CITY-ST-ZIP	Homestead, FL 33033	
TITLE	Treasurer	☐ Delete
NAME	Raul Correa	
STREET ADDRESS	30673 S.W. 148th PL	
CITY-ST-ZIP	Homestead, FL 33033	
TITLE	Secretary	☐ Delete
NAME	Arnold Correa	
STREET ADDRESS	30673 S.W. 148th PL	
CITY-ST-ZIP	Homestead, FL 33033	
TITLE	President	☐ Delete
NAME	Earl Burth	
STREET ADDRESS	26200 S.W. 131 Ct	
CITY-ST-ZIP	Homestead, FL 33032	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
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 19.07(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 its 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:

Earl Burth Earl Burth

1/8/01

(305) 245-7200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2034 (10/00)