

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 16, 2001 8:00 am
Secretary of State

07-16-2001 90002 046 ***150.00

DOCUMENT # P00000065817

1. Entity Name

COMPUTER TROUBLESHOOTERS & CONSULTING, INC.

Principal Place of Business

**15409 WINTERWIND DRIVE
TAMPA FL 33624**

Mailing Address

**15409 WINTERWIND DRIVE
TAMPA FL 33624**

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

59-3657222

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.

343 ALMERIA AVENUE

CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name

ERIC CHAN

Street Address (P.O. Box Number is Not Acceptable)

15409 WINTERWIND DR.

City

TAMPA

FL

Zip Code

33624

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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 **PTD** ☐ Delete
NAME **CHAN, ERIC CHEE H**
STREET ADDRESS **15409 WINTERWIND DRIVE**
CITY-ST-ZIP **TAMPA FL 33624**

TITLE **VD** ☐ Delete
NAME **LAM, LINDA MUI**
STREET ADDRESS **15409 WINTERWIND DRIVE**
CITY-ST-ZIP **TAMPA FL 33624**

TITLE **SD** ☐ Delete
NAME **LIU, NAN-SHYONG D.**
STREET ADDRESS **15409 WINTERWIND DRIVE**
CITY-ST-ZIP **TAMPA FL 33624**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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
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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 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/9/01

813 765 2408

CR2E034 (5/01)

Date: July 9, 2001

Attachment
D# P000005817
A 0074105

Computer Troubleshooters & Consulting Inc.
15409 Winterwind Dr.
Tampa, FL 33624

Dear Sir/Madam;

This is our first year in operation and we have not received your previous notice, therefore we did not know that we have to file it at a certain date until we received your current notice.

We would like to request for a waiver on the penalty and enclosed is a check of \$150.00 for the registration.

Thanks in advance for the trouble.

Sincerely, _____



Eric Chan