

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91317 033 ***150.00

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DOCUMENT # P00000076518

1. Entity Name
PRINTER COMPUTER'S SERVICE CORPORATION



Principal Place of Business
8895 FONTAINEBLEAU BLVD
STE 406
MIAMI FL 33172

Mailing Address
8895 FONTAINEBLEAU BLVD
STE 406
MIAMI FL 33172



2. Principal Place of Business

2700 FIORE WAY
Suite/Apt: #, etc. 201
CITY & STATE DELRAY BEACH FL.
Zip 33445 Country USA

3. Mailing Address

2700 FIORE WAY
Suite/Apt: #, etc. 201
CITY & STATE DELRAY BEACH FL.
Zip 33445 Country USA

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-1052587**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

RANGEL, CARLOS H
8895 FONTAINEBLEAU BLVD
STE 406
MIAMI FL 33172

7. Name and Address of New Registered Agent

Name **CARLOS H. RANGEL**
Street Address (P.O. Box Number is Not Acceptable)
2700 FIORE WAY APT 201
City DELRAY BEACH FL Zip 33445

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Carlos H Rangel**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

02/27/03

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing **\$5.00 May Be**
Trust Fund Contribution. ☐ **Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **RODRIGUEZ, JAVIER O**
STREET ADDRESS **8895 FONTAINEBLEAU BLVD STE 406**
CITY-ST-ZIP **MIAMI FL 33172**

TITLE **D** ☐ Delete
NAME **RANGEL, CARLOS H**
STREET ADDRESS **8895 FONTAINEBLEAU BLVD STE 406**
CITY-ST-ZIP **MIAMI FL 33172**

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☒ Change ☐ Addition
NAME **RODRIGUEZ, JAVIER O**
STREET ADDRESS **2700 FIORE WAY APT. 201**
CITY-ST-ZIP **DELRAY BEACH FL 33445**

TITLE **D** ☒ Change ☐ Addition
NAME **RANGEL, CARLOS H**
STREET ADDRESS **2700 FIORE WAY APT. 201**
CITY-ST-ZIP **DELRAY BEACH FL 33445**

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **CARLOS H. RANGEL**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/27/03

Date

Daytime Phone #

CR2E034 (10/02)