**FILED** 

## **2001 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P0000083576  1. Entity Name COMPUTER HELPINFO, INC.					Feb 19, 2001 8:00 am Secretary of State 02-19-2001 90025 025 ***150.00	
Principal Place of Bu 6129 VIA VENETIA SO DELRAY BEACH FL 33	UTH	Mailing Address 6129 VIA VENETIA SOUTH DELRAY BEACH FL 33484				
2. Principal Place of Business		3. Mailing Address			<del></del>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE
City & State		City & State			4. FEI Number	
Zip	Country	Zip	Coun	itry		5. Certificate of Status Desired   \$8.75 Additional Fee Required
BALDWIN, 600 LIDO I		Name		Street Ad	612	7. Name and Address of New Registered Agent  DWIN, STEPHEN P.O. Box Number is Not Acceptable)  29 VIA VENETIA SOUTH  LRAY BEACH  LRAY BEAC
SIGNATURE Synadian  9. This corporation	e. Inped or printed name of registered agent is eligible to satisfy its Intangible	and title if applicable. (NOTI	E: Registere	d Agent signatur	e required	STEPHEN BALDWIN  when reinstating)  DATE  10. Election Campaign Financing \$5.00 May Be
(See criteria on b		After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of Sta				Trust Fund Contribution.
TITLE  NAME  STREET ADDRESS  -CITY-ST_ZIP	OFFICERS AND	Delete			612	PHEN BALDWIN, P/D Change Addition PO VIA VENETIA SOUTH RAY BEACH, FL 33484
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	1		612	ANIN V. BALDWIN, T/S Change Addition 9 VIA VENETIA SOUTH RAY BEACH, FL 33484
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		1		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	1			☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete				☐ Change ☐ Addition (
TITLE NAME STREET ADDRESS CITY-ST-ZIP	has the information of the last	☐ Delete	CITY-	E Et address -st-zip	d in C:	☐ Change ☐ Addition  Ction 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:

n Stephen Baldwin

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

561-865-2995

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Daytime Phone #