

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 25, 2003 8:00 am
Secretary of State

08-25-2003 90094 003 ***150.00

0128309 AT

DOCUMENT # P00000099073

1. Entity Name
BNI SOFTWARE SOLUTIONS, CORP.



Principal Place of Business
**3332 ASHMOUNT DRIVE
ORLANDO FL 32828**

Mailing Address
**P.O. BOX 780662
ORLANDO FL 32878-0662**



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 **59-3676276**

Applied For
Not Applicable

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

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**AVILES, BOANERGES
3332 ASHMOUNT DRIVE
ORLANDO FL 32828**

Name **Gabriel Aviles**

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

3332 Ashmount Drive

City **Orlando**

FL

Zip Code **32828**

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 *[Signature]* **BOANERGES AVILES 8/21/03** *[Signature]* **GABRIEL AVILES 8/21/03**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P AVILES, BOANERGES 3332 ASHMOUNT DRIVE ORLANDO FL 32828	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST AVILES, NOEMI 3332 ASHMOUNT DRIVE ORLANDO FL 32828	<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	P AVILES, GABRIEL 3332 ASHMOUNT DRIVE ORLANDO, FL 32828	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

[Signature] **BOANERGES AVILES**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

[Signature] **GABRIEL AVILES 8/21/03 407-658-1809**
Date Daytime Phone #

CR2E034 (4/03)

Attachment#

80140648
P00000099073

BNI SOFTWARE SOLUTIONS CORPORATION

August 21, 2003

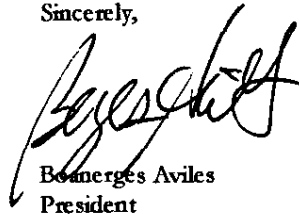
Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Dear Sir or Madam:

On behalf of BNI Software Solutions Corporation (FEI 59-3676276), I apologize for our delayed respond. No one was available to respond on behalf of the corporation; it has been inactive and currently not in operations. However, we **do not** want to cancel our corporation. We humbly request that you accept our \$150 filing fee as filed on time.

Thank you for your consideration in the matter.

Sincerely,



Bernerger Aviles
President