


2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jul 27, 2005 8:00 am
Secretary of State

04-01-2005 90002 008 ***150.00

DOCUMENT # P00000101606					
1. Entity Name COMPUTERS ALL SERVICES, CORP.					
Principal Place of Business 6702 NW 72ND AVE MIAMI FL 33166			Mailing Address 6702 NW 72ND AVE MIAMI FL 33166		
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 65-1053563	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
RODRIGUEZ, ROGELIO 14444 NW 87TH PL. MIAMI FL 33018				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				<div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ (NOTE: Registered Agent signature required when re-registering) <small>Signature, typed or printed name of registered agent and take it applicable</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	RODRIGUEZ, ROGELIO		NAME		
STREET ADDRESS	14444 NW 87TH PL.		STREET ADDRESS		
CITY- ST- ZIP	MIAMI LAKES FL 33018		CITY- ST- ZIP		
TITLE	VCFD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	RODRIGUEZ, LAZARO		NAME		
STREET ADDRESS	17310 N.W. 74 AVE., #102		STREET ADDRESS		
CITY- ST- ZIP	MIAMI FL		CITY- ST- ZIP		
TITLE	ST	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	AMAT, MARTHA		NAME		
STREET ADDRESS	17310 N.W. 74 AVE., #102		STREET ADDRESS		
CITY- ST- ZIP	MIAMI FL		CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY- ST- ZIP			CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY- ST- ZIP			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: <u>Rogelio Rodriguez</u>			Date: <u>7/19/05</u> Daytime Phone #: <u>305-888 6620</u>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					



ATTACHMENT

66025870

#P00000101606

6702 NW 72 Ave, Miami, FL 33166

Phone : (305) 888 6620 Fax: (305) 888 6634 E-mail:comaserv@insc.net

07/19/2005

Florida Department Of State
Annual Reports Section
To whom it may concern:

I am writing this letter to inform you that the Letter advising us of the discrepancy on our annual report/ uniform business report was received on 07/18/05. This letter was dated 04/04/05. Our company will be sending in the documentation requested to file our report and we would like the late fee of \$400.00 waived since we did not receive this letter on time. If you need any further information regarding this case please contact me at 305-888-6620 ext. 202.

Thank you,
Lazaro Rodriguez

Vice President