## **2003 FOR PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR)

## P00000103266 DOCUMENT #

1. Entity Name

BUSINESS 2 COMPUTERS, INC.



## **FILED** Mar 14, 2003 8:00 am \$ Secretary of State

03-14-2003 90054 043 \*\*\*158.75

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Principal Place of Business 4907 SW 129TH AVENUE MIAMI FL 33175			4907 SW 129	Mailing Address 4907 SW 129TH AVENUE MIAMI FL 33175			! ICONICO! !!! BRII! CO!!! BAII! CO!				
2. Principal Place of Business			3. Mailing Ad	3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt.	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & State			City & State	City & State			4. FEI Number 65-1052784			Applied For Not Applicable	
Zìp	Country		Zip	Zip Coun		5. Certificate of Status Desi			\$8.75 Additional Fee Required		7
6. Name and Address of Current Registe				nt		7.	Name and Address of New R	enistered A	gent		┨
				Name		Name and Address of New II	egisterea i	gent		$\dashv$	
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MIAMI FL	33175	* *** ***									1
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the obligation SIGNATURE	tions of regist	y submits this statemen ered agent.	t for the purpose of o	changing its re	egistered office or regi	stered a	gent, or both, in the State of Flo	rida. I am f	amiliar with,	and accept	
5	' Signature, typed	or printed name of registered ag	ent and title if applicable.	(NOTE: F	Registered Agent signature req	uired when	reinstating)	DATE			ĺ
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 Fin Trust Fund Contribution			May Be -	-
10.		OFFICERS AN	ND DIRECTORS		11.	A	DDITIONS/CHANGES TO OFFI	CERS AND	DIRECTOR	S IN 11	7
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12 I hereby o	eartify that the	information supplied w	ith this filips does so	at gualifu for th		0	110 07/9\/:\ Fleeide Ctentee 1				1

indicated on this report or 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:

Daytime Phone #