

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

FILED
May 06, 2002 8:00 am
Secretary of State

05-06-2002 90066 011 ***150.00

DOCUMENT # P 00000110190

1. Entity Name

Software Network Consulting, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3745 SW 154th Ct

3. Mailing Address

3745 SW 154th Ct

Suite, Apt. #, etc.

Miami

Suite, Apt. #, etc.

Miami

City & State

FL

City & State

FL

Zip

33185

Country

USA

Zip

33185

Country

USA

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-1061221

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Carmen Pinto

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

3745 SW 154th Ct

City

Miami

FL

Zip Code

33185

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE

Carmen Pinto

CARMEN PINTO

04/23/02

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	FABIOLA CARMEN PINTO 3745 SW 154TH CT MIAMI, FL 33185	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President
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IN THIS SPACE**

CR2E034B (12/01)

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Carmen Pinto

04/23/02

305-483-7120

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR