

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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

04-25-2003 90262 016 ***150.00

0306463 AV

DOCUMENT # P00000117477

1. Entity Name
COMPUTER TRAINING & CONSULTING BY REINSTEIN, INC



Principal Place of Business
1814 N.E. MIAMI GARDENS DRIVE #708
NORTH MIAMI BEACH FL 33179

Mailing Address
1814 N.E. MIAMI GARDENS DRIVE #708
NORTH MIAMI BEACH FL 33179

2. Principal Place of Business
1835 NE MIAMI GARDENS DR.

3. Mailing Address
1835 NE Miami Gardens Dr.

Suite, Apt. #, etc.

#151

Suite, Apt. #, etc.

#151

City & State

NORTH MIAMI BEACH

City & State

North Miami Beach

Zip

33179

Country-USA

MIAMI-DADE

Zip

33179

Country

USA

4. FEI Number

65-1063896

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

PUJOLS, JOSE R ESQ.
2701 S.W. LEJEUNE ROAD
SUITE 401
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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 Financing
Trust Fund Contribution.

☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE * DPST
NAME REINSTEIN, STEPHEN
STREET ADDRESS 1814 NE MIAMI GARDENS DR #708
CITY-ST-ZIP N. MIAMI BEACH FL 33179

☐ Delete

TITLE *
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE *
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE *
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE *
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE *
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE * DPST
NAME REINSTEIN, STEPHEN
STREET ADDRESS 1835 NE MIAMI GARDENS DR. #151
CITY-ST-ZIP N. MIAMI BEACH, FL 33179

☒ Change ☐ Addition

TITLE *
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE *
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE *
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE *
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE *
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-20-03 305-502-7755

Date

Daytime Phone #

CR2E034 (10/02)