

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

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90091 020 ***150.00

DOCUMENT # P01000006265

1. Entity Name

EZ SOFTWARE SYSTEMS INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3565 N.W. 82ND AVENUE
Suite, Apt. #, etc.

3. Mailing Address

3565 N.W. 82ND AVENUE
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

MIAMI FLORIDA.

City & State

MIAMI FLORIDA.

4. FE Number

65-1081876

Applied For

Not Applicable

33122

U.S.A.

33122

U.S.A.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

OSCAR GARCIA

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

1512 S.W. 118TH C URT

City

MIAMI

FL

33184

**DO NOT WRITE
IN THIS SPACE**

6. 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

Signature, typed or printed name of registered agent, not to be signed by agent

(NOTE: Registered Agent signature required when not signed)

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-STATE-ZIP
P/O
OSCAR GARCIA
1512 S.W. 118TH COURT
MIAMI FLORIDA. 33184

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
S/T
LUIS PUEBLA
1605 S.W. 21ST STREET
MIAMI FLORIDA. 33145

TITLE
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CITY-STATE-ZIP

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CITY-STATE-ZIP

**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07 (3)(c), 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 I am a person 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, date of birth, and telephone number.

SIGNATURE:

(PRESIDENT)

04/20/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNER OF FINANCIAL STATEMENTS

Date

David P. P. P.