2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #   P01000012393

1. Entity Name

TAG SYSTEMS USA, INC.

Principal Place of Business	Mailing Address
10275 NORTHWEST 46TH STREET	10275 NORTHWEST 46TH STREET
SUNRISE FL 33351	SUNRISE FL 33351

2. Principal Place of Business	3. Mailing Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	☐ CHECK HERE IF MAKING CHANGES
City & State	City & State	4. FEI Number 65-1071052 Applied For / Not Applicable
Zip Country	Zip Country	5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CARABALI, LUIS 10275 NORTHWEST 46TH STREET SUNRISE FL 33351	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 $550.00
After September 10, 2003 Fee will be $750.00
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		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD CARABALI, LUIS 10275 NORTHWEST 46TH STREET SUNRISE FL 33351	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (4/03)

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: _____   7/16/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #

Attachment #

9014658

P01000012393

Division of Corporations
Uniform Business Reports Filing
P.O. Box 1500Tallahassee, Fl 32302-1500

Subject: 2003 Uniform Business Report

I am requesting a waiver for late filing my corporation 2003 Uniform Business Report
by May 1 2003

The reasons for my late filing are:

    A. I don't remember receiving the notice on the filing due dates.

    B. My accountant died of cancer and I received my corporate records by late
       June.

Enclosed is the signed -2003 Uniform Business Report and a check for the $150.00 filing
fee.

I am sorry about the late filing, but if you need additional information, pleases don't
hesitate to call me or write me.

LUIS CARABALI
President