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

P01900046529 DOCUMENT #

1. Entity Name

/ NETPATIO Systems INC.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business / 6500 NW //44h	Ave	3. Mailing Address 6500 NW 114th Ave.			
Suite, Apt. #, etc. 103	5	Suite, Apt. #, etc.	1035		
City & State Mianu , FL		City & State wiawe, FL			
Zip 22/7 Count	MADE	Zip 77179	Country DADF		

FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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2. Principal Place of Business // a 3. Mailing Address , / / A				REINS RELIGION			
	NW 114th Ave	3. Mailing Address	4th Ave		g gents co		
Suite, Apt.	#, etc. 1035	Suite, Apt. #, etc.	1035		DO NOT WRITE IN THIS SP	ACE	
City & State		City & State			4. FEI Number 04-3668722	Applied For Not Applicable	
. Zip 33/	178 Country DADE	^{Zip} 33178	Country DA 2)ど		8.75 Additional ee Required	
					7. Name and Address of Current Registered Agent		
			- Name	Name Contraras, Karla Patricia			
DO NOT WRITE			Street A	Street Address (P.O. Box Number is Not Acceptable)			
IN THIS SPACE			1.00	6500 NW 114th Ave # 1035			
<i>6</i> 3			6500				
	.1 -		City 1	wa	nic, FL FL	Zin Code 33/78	
8. The above	named entity submits this systement for	the purpose of changing its			red agent, or both, in the State of Florida. I am fan	niliar with, and accept	
the obligat	ions of registered eggni.	RAU PALMA (V	(1) KA	1/4 C	entaras /	_	
SIGNATURE	Staff II				11/15/20	003	
	Signature of inted name of registered agent a	nd title if applicable. (NOTE	Registered Agent signal	ure required	d when reinstating) DATE		
	nuary 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00	/			9. Election Campaign Financing	\$5.00 May Be	
	Amended UBR is \$61.25	.			Trust Fund Contribution.	Added to Fees	
Make Check	Payable to Florida Department of OFFICERS AND D						
TITLE	PD OFFICERS AND D	DINECTORS	TITLE				
NAME	CONTRERAS KARIA	Patricia	NAME		Sampapsen		
STREET ADDRESS	CONTRERAS, KARLA 6500 NW 11416 AVE.	# 1035	STREET ADDRESS		50 00248530: 11/19/0301029013	₩158.75 a	
CITY-ST-ZIP	mianci, FL 33178		CITY-ST-ZIP				
TITLE	SD	<i>11</i>	TITLE		•	Mag	
NAME	PALMA, RAUL JOSE,	# 1035	NAME .			0	
STREET ADDRESS CITY-ST-ZIP	4500 NW 114th AVE	d # 1000	STREET ADDRESS CITY-ST-ZIP				
TITLE	miani FL 33/7	, 0	TITLE				
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	nortific that the information according to the	this filing does not qualify for		tod in C:	nation 110.07(2VI) Florida Ctatuana I fumbra	u that the information	
indicated of the cor	on this report or supplemental report is reporation or the receiver or trustee empty	true and accurate and that m wered to execute this report	y signature shall h	ave the hapter 6	ection 119.07(3)(i), Florida Statutes. I further certif same legal effect as if made under oath; that I am 07, Florida Statutes; and that my name appears i	n an officer or director in Block 10 or on an	

SIGNATURE:

Fee Waiver Request

Miami, FL November 5, 2003

I was checking the status on Netpatio Systems Inc and appear to be invalid or Inactive. I and my wife are just starting this company and in two years we have not make any money but we want to try a third year again.

In order for this opportunity to be allowed we are requesting a waiver on our reinstatement fees. It is being difficult times and we think this time we will make it.

Please Help.

One of the reasons for not making the payment on time is the confusion on the Addresses of the corporation (this is actually a home based business). You have an Old address on file, we moved on October last year and thus we have not received the correct information. You will see the correct information on the new application of renewal.

We did not know how to make the changes on the corporation and at the end the whole process was not done.

Please but please allow us to start over.

God Bless You all.

ul Josélito Palma

Karla Contreras

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