

2006 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Aug 17, 2006 8:00 am
Secretary of State

08-17-2006 90001 025 ***150.00

DOCUMENT # P01000075452

1. Entity Name
COMPTEx SYSTEMS, INC.



Principal Place of Business
4243 S.W. 75 AVENUE
MIAMI, FL 33155

Mailing Address
4243 S.W. 75 AVENUE
MIAMI, FL 33155

50025326



2. Principal Place of Business
6558 Bird Road

3. Mailing Address
6558 Bird Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

08102006

Chg-P

CR2E034 (11/05)

City & State
Miami, Florida

City & State
Miami, Florida

4. FEI Number 65-1138630
~~APPLIED FOR~~

Applied For
Not Applicable

Zip
33155

Country
USA

Zip
33155

Country
USA

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

DEL AMO, HIRAM E
4243 S.W. 75 AVENUE
MIAMI, FL 33155

Name
Hiram Del Amo

Street Address (P.O. Box Number is Not Acceptable)
6558 Bird Road

City
Miami

FL

Zip Code
33155

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
Due by September 6, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CD
DEL AMO, HIRAM E
4243 S.W. 75 AVENUE
MIAMI, FL 33155 ☐ 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
NAME
STREET ADDRESS
CITY-ST-ZIP
CD
Del Amo, Hiram E.
6558 Bird Road
Miami, Florida 33155 ☒ 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 exemptions contained in Chapter 119, 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

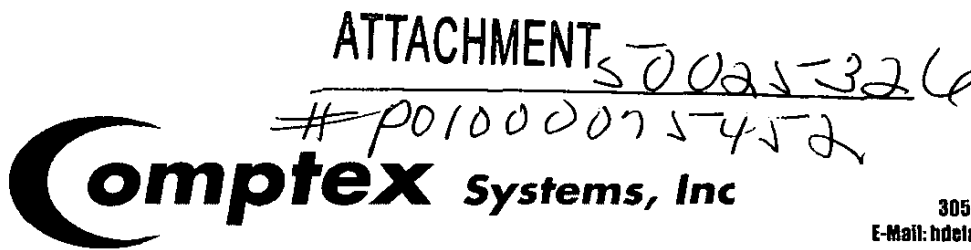
Date

Daytime Phone #

Hiram Del Amo

8/1/06

305-269-8619



6558 Bird Road
Miami, Florida 33155
305-740-9480 fax 305-675-2867
E-Mail: hdelamo@complexsystems.com

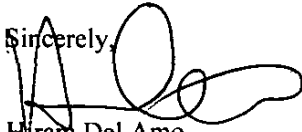
August 1, 2006

Florida Department of State
Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Dear Sir or Madame:

Enclosed please find the 2006 Uniform Business Report for my company along with a check in the amount of \$150.00. Although I realize that this is the second request sent, I wish to inform you that I never received the first request. I have always paid for this report on a timely basis and would have done so this year if I had only received it. Therefore, I respectfully request that you accept this report as being timely filed and paid and abate all late penalties. Your assistance in resolving this matter is greatly appreciated.

Sincerely,



Hiram Del Amo
President