

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

FILED
Sep 16, 2002 8:00 am
Secretary of State

09-16-2002 90160 007 ***158.75

DOCUMENT # *P01000107942*

1. Entity Name

COMTECH SYSTEMS BROKERS INC.

DO NOT WRITE IN THIS SPACE

678128

2. Principal Place of Business

14495 S.W. 159 ST.

3. Mailing Address

14495 S.W. 159 ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI, FLORIDA

City & State

MIAMI, FLORIDA

4. FEI Number

01-0568335

Applied For

Not Applicable

Zip

33177

Country

USA

Zip

33177

Country

USA

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

PATRICIA CLAVIJO

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

14495 S.W. 159 ST.

City

MIAMI

FL

Zip Code

33177

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

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 - ST - ZIP

*OWNER / PRESIDENT
LUIS CLAVIJO
14495 S.W. 159 ST.
MIAMI, FL. 33177*

TITLE
NAME

STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME

STREET ADDRESS
CITY - ST - ZIP

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TITLE
NAME

STREET ADDRESS
CITY - ST - ZIP

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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)(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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/10/02 *786-942-7119*
Date Daytime Phone #

CR2E034B (12/01)

Attachment

COMTECH

SYSTEMS BROKERS INC.

September 09, 2002

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

Re: Comtech Systems Brokers Inc.
Document # P01000107942

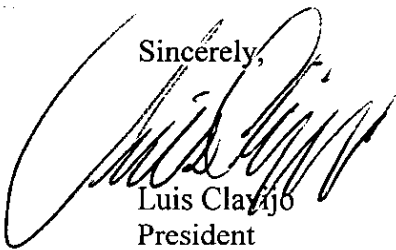
678128

Dear Division of Corporations Representative:

Attached please find the completed 2002 Uniform Business Report (UBR) for the above-referenced entity. Please be advised that we did not receive the prior notice and, accordingly, respectfully request that the \$ 400.00 late fee be waived.

Thank you for your consideration in this matter.

Sincerely,



Luis Clayjo
President