

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 11, 2003 8:00 am
Secretary of State

09-11-2003 90096 038 ***150.00

0054588 AV

DOCUMENT # P02000052980

1. Entity Name

MOUNTJOY COMPUTER SYSTEMS, INC.



Principal Place of Business

1799 NE 164TH STREET
SUITE 105
NORTH MIAMI BEACH FL 33162

Mailing Address

1799 NE 164TH STREET
SUITE 105
NORTH MIAMI BEACH FL 33162



2. Principal Place of Business

1799 NE 164th ST
Suite 107

3. Mailing Address

1799 NE 164th ST
Suite 107

☐ CHECK HERE IF MAKING CHANGES

City & State

North Miami Beach FL
Zip 33162 Country USA

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North Miami Beach FL
Zip 33162 Country USA

4. FEI Number

04-3650688

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SANDS, SIMON
14045 SW 179 TERR
MIAMI FL 33177

7. Name and Address of New Registered Agent

Name Sands Simon
Street Address (P.O. Box Number is Not Acceptable)
2020 NE 135th St
Apt #404
City North Miami FL Zip Code 33181

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 SIMON SANDS 9-3-03
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

TITLE DP
NAME SANDS, SIMON
STREET ADDRESS 14045 SW 179 TERR
CITY-ST-ZIP MIAMI FL 33177 ☐ Delete

TITLE DST
NAME EDLER, SUSANNA
STREET ADDRESS 14045 SW 179 TERR
CITY-ST-ZIP MIAMI FL 33177 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/3/03

Date

Daytime Phone #

(305) 354-4030

CR2E034 (4/03)



Attachment 80147263
PO2000052980
MountJoy Computer Systems
1799 NE 164th St, Suite #107
North Miami Beach, FL 33162
(305)354-4030

09/07/03

Dear Sir/Madam

Enclosed is a check for \$150.00.

MountJoy Computer Systems did not receive a first notice on this form, therefore are we sending the \$150.00. We probably did not receive the first notice due to the fact that we have switched our office to suite #107, versus #105.

Please call (305)354-4030 if further information is needed.

Sincerely

Susanna Edler
DTS

100-100000-100000
100-100000-100000
100-100000-100000
100-100000-100000