2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)

P02000087339 **DOCUMENT#**

1. Entity Name

MVP COMPUTER SOLUTIONS, INC.



FILED Apr 03, 2003 8:00 am Secretary of State 04-03-2003 90154 028 ***158.75

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| Suite. Apt #, etc. Suite. | 6875 WEST 2ND COURT | | | 6875 WEST 2ND COURT | | | | | | | | | | |
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| Zip Country Zip Country S. Country S. Corrificate of Status Desired S. Satura Desire | Suite, Apt. | #, etc. | | Suite, Apt. #, etc. | | | | | CHECK HERE IF MAKING CHANGES | | | | | |
| Second S | City & State | | | City & State | | | | | | | | | | |
| SALDMON, NANCY 6875 WEST 2ND COURT HIALEAH FL 33014 6. The above named entity submits the 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 project agent. **FILE NOW!! FEE IS \$150.00 **After May 1, 2003 Fee will be \$550.00 **Make Check Payable to Florida Department of State** 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE **NAME** STREET AUDRESS CITY-ST-2P** HIALEAH FL 33014 TITLE **NAME** NAME** STREET AUDRESS CITY-ST-2P** NAME** STREET AUDRESS CITY-ST-2P** NAME** STREET AUDRESS CITY-ST-2P** NAME** STREET AUDRESS CITY-ST-2P** NAME** | Zip Country | | | Zip Coun | | | itry | | | | | \$8.75 Additional | | |
| SALDMON, NANCY 8875 WEST 2ND COURT HIALEAH FL 33014 8. The above named entity submits the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and acceptable into obligations of projecting agent. FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE NAME STREET AUDRESS OTTY-ST-2P TITLE NAME NAME STREET AUDRESS OTTY-ST-2P TITLE NAME NAME STREET AUDRESS OTTY-ST-2P TITLE NAME STREET AUDRESS OTTY-ST- | | 6. Name | and Address of Current | Registered Agent | | | ÷ = | 27. Name and Address of New R | | | stered A | stered Agent | | |
| 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 harmliar with, and accept the obligations of progressed agent. SIGNATURE Signature | | | | | | | Name | · | | | | • | | |
| HALEAH FL 33014 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of particle agent. SIGNATURE Signature Sign | | • | IDT | | Stree | | | Address (P.O. Box Number is Not Acceptable) | | | | | | |
| S. 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 propieted agent. SIGNATURE TILE NOW!! FEE IS \$150.00 After May 1, 2003 Fee will be \$\$50.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE NAME SALOMON, NANCY STREET ADDRESS CITY-ST-2P TITLE NAME STREET ADDRESS CITY-ST-2P | | | ını | | | | | | | - Artista | * | | | |
| SIGNATURE Signature Signa | | · · · · · · · · · · · · · · · · · · · | | | | | | | | | | | | |
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| CITY-ST-ZIP 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 | 12. Lhereby o | certify that the | e information supplied with | this filing | does not qualify for | r the exe | mption stat | ed in Sec | tion 1 | 19.07(3)(i), Florida Statutes. I fu | rther certi | fy that the i | nformation | |

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: