

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 09, 2004 8:00 am
Secretary of State

06-09-2004 90003 008 ***150.00

DOCUMENT # P02000107758 1. Entity Name BUSINESS TECHNOLOGY SOLUTIONS, INC.																																	
Principal Place of Business 13050 SW 88 LN MIAMI FL 33186			Mailing Address 13050 SW 88 LN MIAMI FL 33186																														
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country			3. Mailing Address Suite, Apt. #, etc. City & State Zip Country																														
4. FEI Number 57-1139257			Applied For <input type="checkbox"/> Not Applicable																														
5. Certificate of Status Desired <input type="checkbox"/>			\$8.75 Additional Fee Required																														
6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. 1840 SW 22 ST 4 FLR MIAMI FL 33145				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																													
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____																																	
FILE NOW!!! FEE IS \$550.00 DUE BY September 8, 2004 Make Check Payable to Florida Department of State			S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. <input type="checkbox"/>																														
9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>			\$5.00 May Be Added to Fees																														
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE NAME STREET ADDRESS CITY - ST - ZIP</td> <td style="width: 70%;"> DPS VICENTE, RAUL 13050 SW 88 LN MIAMI FL 33186 <input type="checkbox"/> Delete </td> </tr> <tr> <td> T ALFONSO, GREYER 13050 SW 88 LN MIAMI FL 33186 <input type="checkbox"/> Delete </td> <td></td> </tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </table>			TITLE NAME STREET ADDRESS CITY - ST - ZIP	DPS VICENTE, RAUL 13050 SW 88 LN MIAMI FL 33186 <input type="checkbox"/> Delete	T ALFONSO, GREYER 13050 SW 88 LN MIAMI FL 33186 <input type="checkbox"/> Delete												11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE NAME STREET ADDRESS CITY - ST - ZIP</td> <td style="width: 70%;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition </td> </tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </table>			TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition												
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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: Greyer Alfonso - Treasurer 6/4/04																																	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																																	

Attachment

44046443

P02000107758

BUSINESS TECHNOLOGY SOLUTIONS, INC.

13050 SW 88th Lane, Miami, FL 33186
(786) 488-8919 Phone
(305) 752-1493 Fax

June 4, 2004

Glenda E. Hood
Secretary of State
FLORIDA DEPARTMENT OF STATE
Division of Corporations
PO Box 1500
Tallahassee, FL 32302-1500

Ref: FEIN 57-1139257

Dear Ms Hood:

Attached please find Business Technology Solutions' executed *2004 Uniform Business Report*. Note that this report was requested in a timely fashion and the report was just received. By means of this letter we kindly request the late fee filing penalty of \$400.00 be waived. I have also enclosed a check in the amount of \$150.00 for the filing fees.

If you need any further information, do not hesitate to contact me.

Sincerely



Gretter Alfonso
Treasurer