APR 28 2003 10:17AM HP LASERJET 3200

FILED
May 05, 2003 8:00 am
Secretary of State
05-05-2003 91901 044 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

80112307

DOCUMENT #P02000112035

1. Entity Name
MICROMANAGEMENT SYSTEMS INTERNATIONAL, INC.

Principal Place of Business	Mailing Address
1273 NEAPOLITAN RD PUNTA GORDA, FL 33983	1273 NEAPOLITAN RD PUNTA GORDA, FL 33983

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
Same as above	
Suite, Apt #, etc.	Suite, Apt. #, etc.
City & State: 1273 Neapolitan Rd	City & State: Punta Gorda
Zip: 33983 Country: USA	Zip: 33983 Country: Charlotte

4. FEI Number: 54-2071082 ☐ Applied For ☐ Not Applicable

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
DAYA, ASIF M 1273 NEAPOLITAN RD PUNTA GORDA, FL 33983	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 ______________________________ DATE

[illegible]

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAYA, PAMELA J 1273 NEAPOLITAN RD PUNTA GORDA, FL 33983	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAYA, ASIF M 1273 NEAPOLITAN RD PUNTA GORDA, FL 33983	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (10/02)

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: AMDaya Apr. 28, 2003 941-625-4656

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #