

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 05, 2003 8:00 am**  
**Secretary of State**

**DOCUMENT# P02000115547**

**1. Entity**  
ELBER DE J. HERNANDEZ D. SOFTWARES & EQUIPMENTS INC.



05-05-2003 90758 001 \*\*\*\*\*8.75  
05-05-2003 90758 002 \*\*\*150.00

**Principal Place of** **Mailing**  
**21911 LAKE FOREST CIR, #204** **21911 LAKE FOREST CIR, #204**  
**BOCA RATON FL 33433** **BOCA RATON FL 33433**

**33056630**

**2. Principal Place of Business** **3. Mailing Address**  
**3543 WILES ROAD # 204** **3543 WILES ROAD # 204**  
Suite, Apt. #, etc. Suite, Apt. #, etc.

☒ **CHECK HERE IF MAKING CHANGES**

|                                              |                       |                                              |                       |                                                                                 |                                                                      |
|----------------------------------------------|-----------------------|----------------------------------------------|-----------------------|---------------------------------------------------------------------------------|----------------------------------------------------------------------|
| <b>City &amp; State</b><br>COCONUT CREEK, FL |                       | <b>City &amp; State</b><br>COCONUT CREEK, FL |                       | <b>4. FEI Number</b><br>82-0587005                                              | <b>Applied For</b><br><input type="checkbox"/> <b>Not Applicable</b> |
| <b>Zip</b><br>33073                          | <b>Country</b><br>USA | <b>Zip</b><br>33073                          | <b>Country</b><br>USA | <b>5. Certificate of Status</b><br>Required <input checked="" type="checkbox"/> | <b>\$8.75 Additional Fee Required</b>                                |

|                                                                                                                                            |                                                                                                                                                                                                                      |
|--------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>6. Name and Address of Current Registered</b><br>HERNANDEZ DAVILA, ELBER DE JESUS<br>21911 LAKE FOREST CIR, #204<br>BOCA RATON FL 33433 | <b>7. Name and Address of Now Registered</b><br>Name<br>HERNANDEZ DAVILA, ELBER DE JESUS<br>Street Address (P O Box Number is Not Acceptable)<br>3543 WILES ROAD # 204<br>City<br>COCONUT CREEK FL Zip Code<br>33073 |
|--------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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** *Lucy Bernarda Hernandez Barvo*  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) **DATE**

**FILE NOW!! FEE IS \$150.00**  
After May 1, 2003 Fee will be \$550.00  
Make Check Payable to Department of State

**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                                                                                   |                                                                              |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| <b>TITLE</b><br>PD<br><b>NAME</b><br>HERNANDEZ DAVILA, ELBER DE JESUS<br><b>STREET ADDRESS</b><br>21911 LAKE FOREST CIR, #204<br><b>CITY - ST - ZIP</b><br>BOCA RATON FL 33433 | <input type="checkbox"/> Delete            | <b>TITLE</b><br>1<br><b>NAME</b><br>3543 WILES ROAD # 204<br><b>STREET ADDRESS</b><br>COCONUT CREEK, FL 33073<br><b>CITY - ST - ZIP</b> | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| <b>TITLE</b><br>VD<br><b>NAME</b><br>HERNANDEZ BARVO, LUCY BERNARDA<br><b>STREET ADDRESS</b><br>21911 LAKE FOREST CIR, #204<br><b>CITY - ST - ZIP</b><br>BOCA RATON FL 33433   | <input type="checkbox"/> Delete            | <b>TITLE</b><br><b>NAME</b><br>3543 WILES ROAD # 204<br><b>STREET ADDRESS</b><br>COCONUT CREEK, FL 33073<br><b>CITY - ST - ZIP</b>      | <input checked="" type="checkbox"/> Chang <input type="checkbox"/> Additi    |
| <b>TITLE</b><br>SD<br><b>NAME</b><br>JIMENEZ, NASSER<br><b>STREET ADDRESS</b><br>21911 LAKE FOREST CIR, #204<br><b>CITY - ST - ZIP</b><br>BOCA RATON FL 33433                  | <input checked="" type="checkbox"/> Delete | <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY - ST - ZIP</b>                                                          | <input type="checkbox"/> Chang <input type="checkbox"/> Additi               |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY - ST - ZIP</b>                                                                                                 | <input type="checkbox"/> Delete            | <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY - ST - ZIP</b>                                                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY - ST - ZIP</b>                                                                                                 | <input type="checkbox"/> Delete            | <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY - ST - ZIP</b>                                                          | <input type="checkbox"/> Chang <input type="checkbox"/> Additi               |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY - ST - ZIP</b>                                                                                                 | <input type="checkbox"/> Delete            | <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY - ST - ZIP</b>                                                          | <input checked="" type="checkbox"/> Chang <input type="checkbox"/> Additi    |

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 qualified by chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *Lucy Bernarda Hernandez Barvo* **28-04-03 954-5964736**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #