

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 29, 2004 8:00 am
Secretary of State

04-29-2004 90361 050 ***150.00

DOCUMENT # P030000052048	
1. Entry Name PSI, INC	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 741 SW 10th ST		3. Mailing Address	
Suite, Apt #, etc.		Suite, Apt #, etc.	
City & State MIAMI, FL		City & State	
Zip 33130	Country USA	Zip	Country

DO NOT WRITE IN THIS SPACE

4. FFL Number APPLIED FOR	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE	7. Name and Address of Current Registered Agent	
	Name ROBERT LANDAU	
	Street Address (P.O. Box Number is Not Acceptable)	
	City FL	Zip Code

8. The above named entry 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 _____

January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$81.25 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
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10. DISCLOSE INFORMATION ABOUT OFFICERS AND DIRECTORS			
NAME P/S	NAME ROBERT LANDAU	TITLE NAME	DO NOT WRITE IN THIS SPACE
STREET ADDRESS 741 SW 10th ST	STREET ADDRESS MIAMI, FL 33130	STREET ADDRESS CITY-ST-ZIP	
NAME Sra. S. ZADUNAISKY	NAME 741 SW 10th ST	TITLE NAME	DO NOT WRITE IN THIS SPACE
STREET ADDRESS MIAMI, FL 33130	STREET ADDRESS MIAMI, FL 33130	STREET ADDRESS CITY-ST-ZIP	
NAME	NAME	TITLE NAME	DO NOT WRITE IN THIS SPACE
STREET ADDRESS	STREET ADDRESS	STREET ADDRESS CITY-ST-ZIP	
NAME	NAME	TITLE NAME	DO NOT WRITE IN THIS SPACE
STREET ADDRESS	STREET ADDRESS	STREET ADDRESS CITY-ST-ZIP	
NAME	NAME	TITLE NAME	DO NOT WRITE IN THIS SPACE
STREET ADDRESS	STREET ADDRESS	STREET ADDRESS CITY-ST-ZIP	
NAME	NAME	TITLE NAME	DO NOT WRITE IN THIS SPACE
STREET ADDRESS	STREET ADDRESS	STREET ADDRESS CITY-ST-ZIP	

12. I hereby certify that the information submitted with this filing does not qualify for the exemption stated in Section 19.07(3)(c), Florida Statutes. I further certify that the information 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 receiving business, empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 10 or on an attached list.

SIGNATURE **Robert Landau, PRES** DATE **4/29/04**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034B (12/02)

Attachment

44040351

0030000052048

We did not have
operations in 2003
We applied for
OFFERIN on 4/27/04
& are waiting for our #
* Thank you
Hansen