2000 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 22, 2000 8:00 am Secretary of State DOCUMENT # P93000011359 1. Entity Name COMPUTER SOLUTIONS & SOFTWARE INTERNATIONAL, INC 01-22-2000 90012 039 ***158.75 Mailing Address Principal Place of Business 856 S MILITARY TR 21457 CRESTFALLS COURT DEERFIELD BEACH FL 33442 **BOCA RATON FL 33428-4849** OUZIDZ 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0395413 Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BRUNO, STEPHEN Street Address (P.O. Box Number is Not Acceptable) 21457 CRESTFALLS COURT **BOCA RATON FL 33428** Zip Code City f for the purpose of changing its registered office or registered agent, or both, in the State of Florida 8. The above named ent SIGNATURE printed name of registered agent and title if applicable ature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. ☐ Addition PD ☐ Delete TITLE NAME BRUNO, STEPHEN NAME STREET ADDRESS STREET ADDRESS 21457 CRESTFALLS COURT CITY-ST-7IP CITY-ST-ZIP **BOCA RATON FL 33428** ☐ Change ☐ Addition ☐ Delete TITLE TITLE KIM BRUNO NAME NAME STREET ADDRESS STREET ADDRESS 21457 CRESTFALLS COURT CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33428** □-Change -{-}-Addition--TITLE² Detete TITLE STEPHEN BRUNO NAME NAME STREET ADDRESS STREET ADDRESS 21457 CRESTFALLS COURT CITY-ST-ZIP **BOCA RATON FL 33428** CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 pustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 changed, or on an attachment with an address, with all other like empowered.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-7IP

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

☐ Delete

Change

Addition