

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 14, 2003 8:00 am
Secretary of State

04-14-2003 90370 014 ***150.00

DOCUMENT # P93000011705

1. Entity Name
CONTROLLED SYSTEMS I, INC.



Principal Place of Business
**3471 N FED HWY
506
FT. LAUDERDALE FL 33306
US**

Mailing Address
**3471 N FED HWY
506
FT. LAUDERDALE FL 33306
US**

69016937



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

#400

Suite, Apt. #, etc.

#400

City & State

City & State

4. FEI Number **65-0427930**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**J CROUCH, JAY
3471 N FEDERAL HWY #506-400
FORT LAUDERDALE FL 33306**

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

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 Florida 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P/S
CROUCH, JAY
3471 N FEDERAL HWY #506-400
FT LAUDERDALE FL 33306** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
Jennifer Vermaalen
3471 n Federal Hwy Ste 400
Ft Lauderdale FL 33306** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
CROUCH, BRAD
3471 N FEDERAL HWY #506-400
FORT LAUDERDALE FL 33306** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
CROUCH, CRISS
3471 N FEDERAL HWY #506 400
FORT LAUDERDALE FL 33306** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
REYNER, DALE
3471 N FEDERAL HWY #506 400
FORT LAUDERDALE FL 33306** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
BELANGER, BRUCE
3471 N FEDERAL HWY #506
FORT LAUDERDALE FL 33306** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CEO
SHELDON, ROBERT
3471 N FEDERAL HWY #506 400
FORT LAUDERDALE FL 33306** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Brad Crouch 4/8/03 9545618890

Date

Daytime Phone #

CR2E034 (10/02)