

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000087880

1. Entity Name

SYSTEMS & PRODUCTS SERVICES, INC.

FILED
Apr 12, 2000 8:00 am
Secretary of State

04-12-2000 90189 018 ***150.00

Principal Place of Business

Mailing Address

4217 LA SORRENTO CT
TAMPA FL 33611
US

4217 LA SORRENTO CT
TAMPA FL 34465-8804
US

2. Principal Place of Business

3891 N. TAMARISK AVE

3. Mailing Address

3891 N. TAMARISK AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Brown Hills, Florida

City & State

Brown Hills, Florida

4. FEI Number

65-0623196

Applied For

Not Applicable

Zip

34465

Country

USA

Zip

34465

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HARRIS, RONALD
4217 LA SORRENTO CT
TAMPA FL 33611

7. Name and Address of New Registered Agent

Name RONALD C. FRANCISCO

Street Address (P.O. Box Number is Not Acceptable)
3891 N. TAMARISK AVE

City Brown Hills

FL

Zip Code 34465

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 *Ronald C. Francisco*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4-11-2000

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE D
NAME FRANCISCO, RONALD C
STREET ADDRESS 3575 BENNINGTON DRIVE
CITY-ST-ZIP FORT MYERS FL 33919 ☐ Delete

TITLE D
NAME THOMAS, CATHERINE
STREET ADDRESS 4217 LA SORRENTO CT
CITY-ST-ZIP TAMPA FL 33611 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME RONALD C. FRANCISCO
STREET ADDRESS 3891 N. TAMARISK AVE
CITY-ST-ZIP BROWN HILLS, FL 34465 ☒ Change ☐ Addition

TITLE D
NAME CATHERINE THOMAS
STREET ADDRESS 3891 N. TAMARISK AVE
CITY-ST-ZIP BROWN HILLS, FL 34465 ☒ Change ☐ Addition

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

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

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

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

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 required 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: *Ronald C. Francisco*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-11-2000

Date

352-527-7972

Daytime Phone #

CR2E034 (9/99)