

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 02, 2003 8:00 am
Secretary of State

06-02-2003 90194 039 ***400.00

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DOCUMENT # P96000045353

1. Entity Name

ISI INTEGRATED SYSTEMS, INC.



Principal Place of Business

2786 NW 79 AVENUE
MIAMI FL 33122
US

Mailing Address

2786 NW 79 AVENUE
MIAMI FL 33122
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0695726

Applied For

Not Applicable

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

FRUCTUOSO, CARLOS A.

2786 NW 79 AVENUE

MIAMI FL 33122

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 VP ☒ Delete
NAME FRUCTUOSO, CARLOS A.
STREET ADDRESS 2786 NW 79 AVENUE
CITY-ST-ZIP MIAMI FL 33122

TITLE C.O.O. ☒ Change ☐ Addition
NAME Julio Cesar da Encarnacao
STREET ADDRESS Joaoim Ferreira Jr., 561
CITY-ST-ZIP Cachoeira Paulista - SP - BR

TITLE P ☒ Delete
NAME CAPUTO, ROBINSON
STREET ADDRESS 2786 NW 79 AVENUE
CITY-ST-ZIP MIAMI FL 33122

TITLE C.F.O. ☒ Change ☐ Addition
NAME Gumercindo L. Naia
STREET ADDRESS Rua Joao Gonzaga, 33 Centro
CITY-ST-ZIP Varginha - RJ - BR

TITLE D ☒ Delete
NAME VAZ CALIL, ELIAS JOSE
STREET ADDRESS 2786 NW 79 AVENUE
CITY-ST-ZIP MIAMI FL 33122

TITLE C.E.O. ☒ Change ☐ Addition
NAME Elias Coutinho do Nascimento
STREET ADDRESS Rua Dra. Neide Aparecida Idolito, 123
CITY-ST-ZIP U. Clementina SP - BR

TITLE D ☒ Delete
NAME LIMA, JOSE DE SOUZA
STREET ADDRESS 2786 NW 79 AVENUE
CITY-ST-ZIP MIAMI FL 33122

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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

5/1/03

Date

305 468-8535

Daytime Phone #

CR2E034 (10/02)