

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 27, 2000 8:00 am
Secretary of State

04-27-2000 90065 022 ***150.00

948306



DO NOT WRITE IN THIS SPACE

DOCUMENT # P96000055125

1. Entity Name

INDUSTRIAL TRACKING SYSTEMS, INC.

Principal Place of Business

Mailing Address

330SW 187 AVE
 PEMBROKE PINES FL 33029
 US

330SW 187 AVE
 PEMBROKE PINES FL 33029
 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

65-0685690

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FERNANDEZ, RAIMUNDO
330 SW187 AVE
PEMBROKE PINES FL 33029

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|----------------|-------------------------|--|
| TITLE | P | <input checked="" type="checkbox"/> Delete |
| NAME | HART, TIMOTHY | |
| STREET ADDRESS | 9120 SW 68 ST | |
| CITY-ST-ZIP | MIAMI FL 33173 | |
| TITLE | VP | <input type="checkbox"/> Delete |
| NAME | FUNDORA, JOSE L | |
| STREET ADDRESS | 18995 NW 62 AVENUE #202 | |
| CITY-ST-ZIP | MIAMI FL 33015 | |
| TITLE | VP | <input type="checkbox"/> Delete |
| NAME | FERNANDEZ, RAIMUNDO | |
| STREET ADDRESS | 330 SW 187 AVE | |
| CITY-ST-ZIP | PEMBROKE PINES FL 33029 | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

| | | |
|----------------|---------------------------------|--|
| TITLE | President | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | CARLOS LOPEZ | |
| STREET ADDRESS | 4232 SW 2nd TERR, Mia, FL 33134 | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | VP OF SALES & MARKETING | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | FERNANDEZ RAIMUNDO | |
| STREET ADDRESS | 330 SW 187 AVE | |
| CITY-ST-ZIP | PEMBROKE PINES, FL 33029 | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

RAIMUNDO FERNANDEZ

4/17/00 954-661-5367

CR2E034 (9/99)