

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 09, 2002 8:00 am
Secretary of State

05-09-2002 90090 014 ***150.00

DOCUMENT # P96000057021

1. Entity Name
BIZCOM U.S.A., INC.

Principal Place of Business

Mailing Address

~~914 MATANZAS AVENUE~~
~~CORAL GABLES FL 33146~~

~~914 MATANZAS AVENUE~~
~~CORAL GABLES FL 33146~~



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

5440 NW 33RD AVE
 (Suite) Apt. #, etc.
106

5440 NW 33RD AVE
 (Suite) Apt. #, etc.
106

City & State
FT. LAUDERDALE, FL

City & State
FT. LAUDERDALE, FL

Zip
33309

Zip
33309

6. Name and Address of Current Registered Agent

4. FEI Number
65-0681772

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

~~LIPSON, GARY D~~
~~914 MATANZAS AVENUE~~
~~CORAL GABLES FL 33146~~

7. Name and Address of New Registered Agent
Name
HANK KLEIN
Street Address (P.O. Box Number is Not Acceptable)
5440 NW 33RD AVE
SUITE 106
City
FT. LAUDERDALE **FL** **Zip Code**
33309

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]* **HANAN "HANK" KLEIN, PRESIDENT**
 (NOTE: Registered Agent signature required when reinstating)

DATE
5/23/02

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, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
 Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete
	LIPSON, GARY D	914 MATANZAS AVENUE	CORAL GABLES FL 33146	
	HANK KLEIN	5440 NW 33RD AVE, STE 106	FT. LAUDERDALE, FL 33309	<input checked="" type="checkbox"/> Delete
	DIRECTOR	EDWARD W. KENT III	5440 NW 33RD AVE STE	<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	DIRECTOR & PRESIDENT	HANK KLEIN	5440 NW 33RD AVE STE 106	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
	DIRECTOR	EDWARD W. KENT III	5440 NW 33RD AVE STE 106	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> 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: *[Signature]* **HANAN "HANK" KLEIN, PRESIDENT** **DATE** **5/23/02** **DAYTIME PHONE #** **(954) 714-0028**

CR2E034 (9/01)