

2002 UNIFORM BUSINESS REPORT (UBR)

0456652 AV

DOCUMENT # P96000068865

1. Entry Name
F.O.P.M.E. SYSTEMS INTERNATIONAL, INC.

FILED

04 MAR 26 AM 8:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

27910 US HWY 19 NO
CLEARWATER FL 33761
US

Mailing Address

27910 US HWY 19 NO
CLEARWATER FL 33761
US

W0400003988



2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4175 E BAY DR

STE 104

CLEARWATER, FL

33764

REINSTATEMENT 03-04

4. FEI Number

59-3402917

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LIBERTI, FRANK E

27910 US HWY 19 NO
CLEARWATER FL 33761

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

600023554486

10/03/03--01087--017 **550.00

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]

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

(NOTE: Registered Agent signature required when reinstating)

2-25-04

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, 2002 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 NAME ☐ Delete
D LIBERTI, FRANK E
STREET ADDRESS 27910 US HWY 19 NO
CITY-ST-ZIP CLEARWATER FL 33761

TITLE NAME ☒ Delete
PST EVENSTAD, KIRK
STREET ADDRESS 27910 US HWY 19 NO
CITY-ST-ZIP CLEARWATER FL 33761

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☐ Change ☐ Addition
600023554486
12/19/03--01044--017 **200.00

TITLE NAME ☐ Change ☒ Addition
TREASURER JANICE C LIBERTI
STREET ADDRESS 2802 CHANCERY LN
CITY-ST-ZIP CLEARWATER FL 33759

TITLE NAME ☐ Change ☐ Addition
600023554486
01/27/04--01016--014 **150.00

TITLE NAME ☐ Change ☐ Addition
600023554486
02/25/04--01028--010 **150.00

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

TITLE NAME ☐ Change ☐ Addition
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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JANICE C LIBERTI

Date

Daytime Phone #

CR2E034 (9/01)