

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91519 047 ***150.00

DOCUMENT # **P96000083658**

1. Entity Name
COLLIER'S SOFTWARE SERVICES, INC



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
7321 NW 1ST MANOR

3. Mailing Address
7321 NW 1ST MANOR

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
PLANTATION FL

City & State
PLANTATION FL

4. FEI Number
65-0701252

Applied For
Not Applicable

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

Zip
33317

Country

Zip
33317

Country

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
CHESTER COLLIER

Street Address (P.O. Box Number is Not Acceptable)
7321 NW 1ST MANOR

City
PLANTATION

FL

Zip Code
33317

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, the registered agent.

SIGNATURE *Chester Collier* (PRESIDENT) **CHESTER COLLIER** **4.14.2003**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered agent signature required when reinstating)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PRESIDENT CHESTER COLLIER 7321 NW 1ST MANOR PLANTATION FL 33317	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: *Chester Collier* **4.14.2003 (954) 327-8120**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034B (12/02)