DOCUMENT # P9700010245 1. Entity Name CAVALCANTI COMPUTER SERVICE, INC.					Mar 05, 2001 8:00 am Secretary of State 03-05-2001 90331 046 ***150.00				
Principal Place of Busin	iess	Mailing Address							
43 IVES DAIRY ROAD #5 ORTH MIAMI FL 33179		343 IVES DAIRY ROAD #5 NORTH MIAMI FL 33179				1"1110 2 0 5	in e		
						<i>UU0305</i>			
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address							
		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
City & State		City & State	``	4.	FEI Number	65-0723607		_ 	plied For
Zip	Country	Zip	Country	5. (Certificate of	Status Desired		8.75 Add	
6. Na		gistered Agent		7. 1	Name and A	dress of New Re			
<u> </u>		<u> </u>	Name						
CAVALCANTI, IVATAN 343 IVES DAIRY ROAD #5			Street Ad	ddress (P.O. E	Box Number i	s Not Acceptable))		
NORTH MIAM	I FL 33179					1.			
			City			, , ,,	FL	Zip Code	e
R The above named a	ntity submits this statement for th	e purpose of changing its	registered office or	renietered an	ent or both	in the State of Flor	 -	J	
	ped or printed name of registered agent and	title if applicable. (NOTE	Registered Agent signatu	re required when re	einstating)		DATE		
Signature, typ 9. This corporation is 6	eligible to satisfy its Intangible nt and elects to do so.	T	! FEE IS \$150.0	00 50.00	10. Electi	on Campaign Fina	ancing _		0 May Be I to Fees
9. This corporation is a Tax filing requireme (See criteria on bac	eligible to satisfy its Intangible nt and elects to do so.	FILE NOW!! After MAY 1, 200 Make Check Payab	! FEE IS \$150.0	00 50.00 t of State	10. Electi Trust		ancing	Added	to Fees
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of the corporation or the receiver of trustee amowered 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

2001 UNIFORM BUSINESS REPORT (UBR)

3-7-2001

305 651 5370