

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2003 8:00 am
Secretary of State

04-11-2003 90081 020 ***150.00

DOCUMENT # P97000033153

1. Entity Name

COMMUNICATIONS HARDWARE INTERNATIONAL, INC.



Principal Place of Business

8321 PINES BLVD

BAY 6-5

PEMBROKE PINES FL 33024

Mailing Address

P O BOX 245398

PEMBROKE PINES FL 33024

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

65-0771604

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BRAZIL, MARCIA

1971 NW 96 TERRACE APT. M

PEMBROKE PINES FL 33024

Name: **BRAZIL, MARCIA**

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

8321 PINES BLVD, BAY 6-5

City **PEMBROKE PINES**

FL

Zip Code **33024**

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 registered agent.

SIGNATURE *[Signature]* **MARCIA BRAZIL**

(NOTE: Registered Agent signature required when reinstating)

DATE **4/9/03**

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **BRAZIL, MARCIA**
STREET ADDRESS **2031 NW 96 TR**
CITY-ST-ZIP **PEMBROKE PINES FL 33024**

TITLE **DIRECTOR** ☒ Change ☐ Addition
NAME **BRAZIL, MARCIA**
STREET ADDRESS **8321 PINES BLVD, BAY 6-5**
CITY-ST-ZIP **PEMBROKE PINES FL 33024**

TITLE **D** ☐ Delete
NAME **BRAZIL, STEPHEN R**
STREET ADDRESS **1971 NW 96TH TERRACE**
CITY-ST-ZIP **PEMBROKE PINES FL 33024**

TITLE **DIRECTOR** ☒ Change ☐ Addition
NAME **BRAZIL, STEPHEN R**
STREET ADDRESS **8321 PINES BLVD, BAY 6-5**
CITY-ST-ZIP **PEMBROKE PINES, FL 33024**

TITLE ☐ Delete
NAME
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*

MARCIA BRAZIL

Date

Daytime Phone #

CR2E034 (10/02)