FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700035233

1. Corporation Name

ULTIMATE LOGIC SOLUTION, INC.

Principal	Place	of	Business
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Mailing Address

Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90176 043 ***150.00



7878 KENSINGHAM COURT ORLANDO FL 32835		7878 KENSINGHAM COURT ORLANDO FL 32835						
						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed 04/18/1997		
2. Principal Place of Business 2a. Mailing Address			4. FEI Number App	olied For				
21		26				59-3441341 Not	Applicable	
	Suite, Apt. #, etc. Suite, Apt. #, etc.		5. Certificate of Status Desired					
22		27		معطت ويعول	-5. Certificate of Status Desired	quired		
		City & State	City & State			6. Election Campaign Financing \$5.00	May Be	
23		28				Trust Fund Contribution Added to	Fees	
Zip	Country	Zip	Zip Country			8. This corporation owes the current year Intangible	_	
24	25	29	30			1 discital Floperty Tax.	□No	
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered Agent		
				81	Name			
PRASHAD, HEIMANT 7878 KENSINGHAM COURT			82	Street Ac	eet Address (P.O. Box Number is Not Acceptable)			
	ANDO FL 32835			83	ļ			
URL	ANDO FL 32033			83	! 		}	
				84	City	FL 85 Zip C	ode	
office or n	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida, Such change was a	autnorize	a by	the corpora	orporation submits this statement for the purpose of changing its ation's board of directors. I hereby accept the appointment as reg	registered pistered	
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTI	E: Registere	d Ager	it signature requ	uired when reinstating) DATE		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTO		
TITLE	D	☐ DELETE	1.1 T	ITLE		☐ Change	☐ Addition	
NAME)	PRASHAD, HEIMANT		1.2 N	AME				
STREET ADORESS	7878 KENSINGHAM COURT		1.3 S	TREET	T ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32835		1.4 0	ITY-S	T-ZIP			
TITLE	D	DELETE	2.1 T	πLE		☐ Change	☐ Addition	
NAME	PRASHAD, YASMIN 22 NA		IAME					
STREET ADDRESS			TREET	TADORESS	والمحاربة ومحاجم الخالف مستطيعها المتحارب والمالية وموجد ومسطيع والمالية	^		
CITY-ST-ZIP	A-1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		OTY-S	iT-ZIP				
TITLE		☐ DELETE	3.1 T			☐ Change	☐ Addition	
NAME			3.2 N	IAME				
STREET ADDRESS					TADDRESS		Í	
CITY-ST-ZIP		T-111-000-4	3.4. (ITY-S	IT-ZIP	<u></u>		
TITLE		☐ DELETE	4.1 T	ΠLE		☐ Change	☐ Addition	
NAME			4.21	NAME			ļ	
STREET ADDRESS			4.3 S	TREE	T ADDRESS			
CITY-ST-ZIP			4.4 0	TY-S	T-ZIP			
TITLE		DELETE	5.1 T			☐ Change	Addition	
NAME			5.2 N	IAME				
STREET ADDRESS			5.3 S	TREET	TADORESS			
CITY-ST-ZIP			5.4 0	ITY-S	T-ZIP			
TITLE	******	☐ DELETE	6.1 T	TILE		☐ Change	☐ Addition	

14. 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 annual report or suppliemental annual 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 12 or Block 13 if changed, opport an attachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS

经转货 的人名意达

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Daytime Phone #