## **2003 FOR PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR)

## P97000035717 **DOCUMENT #** 1. Entity Name SYSTEMS EXPRESS, INC.





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Street_Address (P.O. Box Number is Not Acceptable)   Street_Address (P.O. Box Number is Not Acceptable)		***				Name	<u> </u>	Thanks and Addition of New Tie	rgistered Ag	joint .	<del>_</del> -
Side 1 ST CT FT LAUDERDALE FL 33332  City  City  FL  Zip Code  8. The above named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Florida. I am familiar with, and accept the originations of registered pagent.  SIGNATURE  Signature, types or present same of registered agent and site in applicable  (NOTE Registered Agent speakure days with in the State of Florida. I am familiar with, and accept the originations of registered agent, or both, in the State of Florida. I am familiar with, and accept the originations of registered agent, or both, in the State of Florida. I am familiar with, and accept the originations of registered agent, or both, in the State of Florida. I am familiar with, and accept the originations of registered agent, or both, in the State of Florida. I am familiar with, and accept the originations of registered agent, or both, in the State of Florida. I am familiar with, and accept the originations of registered agent, or both, in the State of Florida. I am familiar with, and accept the originations of registered agent, or both, in the State of Florida. I am familiar with, and accept the originations of registered agent, or both, in the State of Florida. I am familiar with, and accept the originations of registered agent, or both, in the State of Florida. I am familiar with, and accept the originations of registered agent, or both, in the State of Florida. I am familiar with, and accept the originations of registered agent, or both, in the State of Florida. I am familiar with, and accept the originations of registered agent, or both, in the State of Florida. I am familiar with, and accept the originations of registered agent, or both, in the State of Florida. I am familiar with, and accept the originations of registered agent, or both, in the State of Florida. I am familiar with, and accept the Addition of t	SHIM. SU	SAN K									
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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	2. Thereby co	ertify that the	information supplied with the	nis filing does not qualify to	or the even	ntion stated in	Soction	110 07/3Vi) Floride Otens 11		45-471	

changed, or on an attachment with an address, with all other like empowered. 904-519

SIGNATURE: